Reference from TCM Supervisor

Candidate Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_            Date\_\_\_/\_\_\_/\_\_\_\_\_

Reference Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reference Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mindful Medicine Worldwide  ( [www.mindfulmedicineworldwide.org](http://www.mindfulmedicineworldwide.org) ) is a volunteer organization where each volunteer represents us in a multi-cultural environment with varying cultural sensitivities.  Once in-country, our volunteers are very much self-directed, often without direct oversight.  An inability on the volunteer’s part to act in an ethical, moral and culturally appropriate way may lead to an unfavorable situation for both themselves and the future of MMW.

It is therefore of the utmost importance that we know each volunteer will act in a culturally sensitive and ethical manner at all times both in the clinic and during their off hours.  We are therefore relying on your impression of the candidate and request the utmost degree of transparency in your answers.  No candidate is accepted or rejected solely on the answers of one reference.

Please return this application, by email or post, within 7 days of receiving it, as without completed reference forms the application process cannot continue.

Return to: **Mindful Medicine Worldwide, Inc**
               1011 W Wellington Ave

 Suite 220

 Chicago, IL
               60657
        info@mindfulmedicineworldwide.org

We sincerely thank you for you time and effort.

**General Information**

How long and in what capacity have you known the candidate?

**Professional Proficiency**

As a volunteer the candidate will be responsible for the treatment of widely varying patient presentations at a pace which is much faster than here in the US.  It is therefore important that we have a good idea of the candidates skill set.  Please give us your honest opinion of the candidates proficiency level in the following areas :

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Skill | NA | Poor | Average | Good | Excellent |
| Western Diagnosis |  |  |  |  |  |
| TCM diagnosis and pattern differentiation |  |  |  |  |  |
| Pulse and Tongue |  |  |  |  |  |
| Acupuncture point selection |  |  |  |  |  |
| Point Location |  |  |  |  |  |
| Needling technique |  |  |  |  |  |
| Herbal formula selection |  |  |  |  |  |
| Formula modification |  |  |  |  |  |
| Tui Na |  |  |  |  |  |
| Confidence in above skills |  |  |  |  |  |
| Ability to work independently |  |  |  |  |  |

**Motivation And Commitment**

An applicant’s personality and life goals should be consistent with volunteer service under challenging conditions. Applicants should be willing to give of themselves. They should not have rigid or overly high expectations about overseas service, and
joining Mindful Medicine Worldwide should relate to their past experiences and future plans.

From your knowledge, please give an example of a significant commitment that the applicant has fulfilled.

Express your concerns, if any, about the applicant’s ability to fulfill a commitment:

**Ethical Foundation**

As a Mindful Medicine Worldwide volunteer, the candidate will be representing our organization both in the clinic and in their off hours.  It is extremely important to us that all volunteers hold themselves to the highest ethical standards in all their actions.

Are your aware of any ethical violations that the candidate has committed?  If so please elaborate.

Do you feel the candidate has the ethical foundation with which to represent our organization while unsupervised for extended periods of time?

Please express any doubts you may have about the candidate’s ethical foundation:

**Emotional Maturity**

Mindful  Medicine Worldwide volunteers are exposed to unfamiliar living conditions without the support systems that have provided them security in the past. Their work requires that they respond appropriately to the needs of others, as well as their own.

A. From your knowledge of the applicant, how well do you think he or she has demonstrated the ability to:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not Applicable | Poorly | Adequately | Very Well |
| Cope with stressful working and living situations |  |  |  |  |
| Cope with separation from family and friends |  |  |  |  |
| Balance their own needs with the needs of others |  |  |  |  |

B. Please describe how the applicant has handled a difficult situation, requiring any of the above abilities:

Express your concerns, if any, about the applicant’s emotional maturity:

**Cultural Sensitivity**

Volunteers must be willing and able to observe, accept, or in some effective way cope with the ideas and behaviors of others. They must also be able to adjust their own behavior within the framework of another culture/society. This includes
the ability to understand the experiences and problems of others.

From your knowledge of the applicant, how well do you think he or she has demonstrated the following in his or her life:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not Applicable | Poorly | Adequately | Very Well |
| Changed his or her behavior to accommodate others |  |  |  |  |
| Responded to the needs of others |  |  |  |  |
| Adapted to new customs |  |  |  |  |
| Worked with people of different backgrounds |  |  |  |  |

Express your concerns, if any, about the applicant’s ability to work with diverse groups:

Overall Recommendation
Please check one of the following to summarize your overall recommendation of the applicant:
❏ I recommend the applicant without reservation as an excellent prospect for Mindful Medicine Worldwide service.
❏ On the whole, I recommend the applicant as a good prospect for Mindful Medicine Worldwide service.
❏ I have some reservations but feel that he or she has a reasonable chance of success in the Mindful Medicine Worldwide.
Please explain:

❏ I have substantial doubts about the applicant’s suitability for Mindful Medicine Worldwide service.
Please explain:

**Confidentiality Statement**
❏ I DO NOT authorize Mindful Medicine Worldwide to identify me as the source of this reference, nor do I authorize the Mindful Medicine Worldwide to release a copy of this reference in its entirety to the applicant. I realize that a summary
of this reference may be released without my approval.
❏ I AUTHORIZE Mindful Medicine Worldwide to identify me as the source of this reference and to release a copy of this reference, upon request, to the applicant.

Can Mindful Medicine Worldwide contact you to discuss this reference?  Yes χ    No χ

**Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_             Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**