



FORM FOR REFERENCE CHECK

Applicant Name: _____

Reference Name: _____

Reference Address: _____

Reference Phone: _____

1. What is your relationship to the applicant?
2. How long have you known the applicant?
3. How well do you know the applicant?
4. How would you describe the applicant?
5. How would you describe the applicant's ability to relate to adults?
6. How would you describe the applicant's ability to relate to adults with special needs, children and/or youths?
7. How would you describe the applicant's leadership ability?
8. How would you feel about having the applicant as a volunteer worker with your adults with special needs, child and/or youth?
9. Do you know any characteristics that would negatively affect the applicant's ability to work with adults with special needs, children and/or youths? If so, please describe.
10. Do you have any knowledge that the applicant has ever been convicted of a crime? If so, please describe.
11. Please list any other comments you would like to make:

Reference inquiry completed by: _____

Signature

Date