REFERENCE CHECK FORM

APPLICANT:			
Name (Last)	(First)	(Middle)	
REFERENCE:			
Reference Name (Last)	(First)	(Middle)	
Address	City	State	ZIP Code
Telephone	Cell	E-Mail	
What is your relationship to the applications application of the appli	ant?		
How long have you known the applica	nt?		
How well do you know the applicant?			
How would you describe the applicant	's general personality?		
How would you describe the applicant	's ability to relate to children and/or yo	uth?	
How would you describe the applicant	's leadership abilities?		
How would you feel about having the a	applicant as a volunteer worker with yo	our child and/or youth?	
Do you know of any characteristics or and/or youth? If so, please describe.	circumstances that would negatively af	fect the applicant's abilit	y to work with children
Do you have any knowledge that the ap	oplicant has ever been convicted of a co	rime? If so, please descr	ibe.
Please list any other comments you wo	uld like to make.		
Reference inquiry completed by	y:		
Print Name			
Signature		Date	

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