CONFIDENTIAL REFERENCE FORM

Name of Candidate: _____

Address: _____

_____

_____

The above named candidate has applied to undertake volunteer work with children/young people/vulnerable adults in _____ parish, and has nominated you as a referee. On the basis of your knowledge and experience of this person, could you please provide the following information:

1. How long have you known the candidate? _____

2. In what capacity do you know him/her? _____

3. Do you consider the applicant to be suitable to work with children and/or vulnerable adults? Yes ❑ No ❑

4. Are there any reasons, you are aware of, which would render this person unsuitable to work with children and/or vulnerable adults? Yes ❑ No ❑

   If "Yes" please indicate reasons:

   _____

   _____

5. Please list any qualities you feel would make this candidate suitable to work with children and/or vulnerable adults in a parish or diocesan setting:

   _____

   _____

Name of Referee: _____

Address: _____

_____

E-mail: _____ Daytime Telephone: _____

Mobile: _____ Evening Telephone: _____

Date: _____ Signature: _____