

CONFIDENTIAL

RECORD OF REFERENCE CHECK

APPLICANT	
Name:	
REFEREES CONTACTED	
Referee 1	
Name:	
Relationship to applicant:	
Date contacted:	Contacted by: ☐ Phone ☐ Email ☐ Personal conversation
Summary of remarks about t	ne applicant's fitness and suitability for working with children or youth:
Referee 2	
Name:	
Relationship to applicant:	
Date contacted:	Contacted by: ☐ Phone ☐ Email ☐ Personal conversation
Summary of remarks about t	ne applicant's fitness and suitability for working with children or youth



CHURCH CONTACTED

Church 1		
Name of person contacted:		
Position / role in the church:		
Date contacted:	Contacted by: ☐ Pho	one 🗆 Email 🗆 Personal conversation
Summary of remarks about the appl	icant's fitness and suitab	oility for working with children or youth:
Church 2 (if required)		
Name of person contacted:		
Position / role in the church:		
Date contacted:	Contacted by: ☐ Pho	one 🗆 Email 🗆 Personal conversation
Summary of remarks about the appl	icant's fitness and suitab	ility for working with children or youth:
PERSON CONDUCTING REFER	RENCE CHECK	
Name:		
Signature:		Date: