



VOLUNTEER REFERENCE FORM

Please complete this form clearly using block capitals.

_____ (Club or league name)

_____ (Name of individual)

has expressed an interest in being a volunteer and has given your name as a referee. This post involves substantial access to children. As an organisation committed to the welfare and protection of children, we are obviously anxious to know whether you would have any reason at all to be concerned about the applicant being in contact with children or young people.

Would you consider the above named person poses any risk to the welfare of children or young people?

Yes No **(If answered yes, we will contact you in confidence)**

If you are happy to complete this reference, any information will be treated with due confidentiality and in accordance with relevant legislation and guidance and will only be shared with the person conducting the assessment of a candidate's suitability for a post, if he/she is offered the position in question. We would appreciate your being extremely candid, open and honest in your evaluation of this person.

How long have you known this person? _____

In what capacity? _____

Please comment on this person's suitability to work with children _____

How would you describe their personality? _____

Form

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Please rate this person on the following ticking ✓ one box for each statement

	Poor	Good	Excellent
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can Motivate Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trustworthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Administration Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Is there anything else you feel we should know about this person?

Print Name _____

Signed _____ Date _____

Position _____

Organisation _____

Adapted from "Our Duty of Care" published by Child Care N.I. (1992)