

Confidential Reference Form 2016v1

This Confidential Reference Form (RF) is to help to ensure that thorough reference checks are completed and is a supporting document for any appointment of an Adult Member. This form may either be filled in by the Referee, or by the person requiring the reference during a meeting or telephone discussion with the person providing the Reference. It should be kept with the AAM form.

Name of applicant**I.D. Number****Address**

 Postcode **Appointment under consideration**

Dear Reference

The above-named has offered to help with the work of the SCOUTS South Africa (SSA) and given your name as a Referee.

As an organisation committed to the welfare and protection of children and young people, we must be sure that any new volunteers are suitable before they can be accepted. It would be appreciated if you could assist in this important matter.

Could you please take a few minutes to complete this reference, which will remain absolutely confidential and return it to the person identified at the bottom of this page.

It would be very helpful to have your reply by

In commenting on the applicant please would you bear in mind that the appointment under consideration may involve substantial work with young people or possible funds. We would therefore appreciate you being extremely candid in your evaluation.

Thank you for your help.

Yours sincerely

(Name of Sender)

[SGL, DC, RTC]

Please return to

 Email
 Cell No:



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Please use capital letters

1. How long have you known the applicant?

Poor Average Good Very Good

2. In what capacity?

3. Are you aware of any reasons why the applicant should not be considered for the appointment?

Yes No

4. What attributes does the applicant have that would make them particularly suitable?

5. How would you describe their personality?

6. Please rate the applicant on the following:

Responsibility

Maturity

Self-motivation

Motivating others

Commitment

Trustworthiness

Working with adults

Respect for others

Working with youth

7. Are there any comments you would like to make about the applicant?

Name of the Referee:

Contact details:

Tel No:	
Email:	

Signature (Referee / Interviewer)

If you cannot digitally sign this form, please print, sign, scan and return the form by email.