

# Vine Fellowship Reference Contact Form

Applicant's Name: \_\_\_\_\_

This form should be given to the reference listed below to be filled out by them and returned to Vine Fellowship Children/Youth Department or these questions should be asked by the Vine Fellowship Department head conducting a phone interview.

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1. Your name and relationship to the applicant:
2. How long have you known the applicant?
3. The applicant is interested in working with children at our church. Do you feel he/she is a good candidate to work with children or youth? If no, please explain.
4. To your knowledge, has the applicant worked with children or youth in the past? \_\_\_\_\_ If yes, in what capacity?
5. Do you know of any reason or past experiences that would possibly prohibit the applicant from working with children or youth? \_\_\_\_\_ if yes, please explain.
6. Would you recommend the applicant to work in our children or youth programs?
7. On a scale of 1 to 5, 5 being the highest: what recommendation would you give the applicant in reference to working with children or youth? (circle one) 1 2 3 4 5

Additional thought or comments:

----- office use only -----

If this form was not filled out by an individual, name of person conducting this reference check:

\_\_\_\_\_

Date: \_\_\_\_\_ Method of contact: (circle) telephone in-person conversation

Each application needs 2 forms from separate references. Please attach to application upon completion of this form.