Episcopal Diocese of San Diego

Personal Reference Form

Name of Church: _____

Address of Church: _____

Name of Rector or Vicar: _____

Dear _____,
Name of Reference

_____
Name of Applicant

has submitted an application to work as an employee or volunteer with us, and gave your name as a personal reference. We ask that you complete this form and return it in the enclosed envelope so that we may make a decision on the applicant's ability to fulfill this commitment.

We appreciate your candor and thank you for your help.

Name of person requesting referral information _____

Signature_____

Date:_____

Questions for Personal Reference
(Please feel free to write on back or to attach additional sheets of paper if needed.)

1. How long have you known the applicant?

2. In what capacity have you known the applicant?

3. The applicant has applied to work as:

_____
Name of Position Sought

Are you aware of any problems or concerns that could limit his/her ability to fulfill such a commitment, or to perform duties associated with such a position? (These concerns could include physical, emotional, social, or other issues.)
If yes, please explain:

Where Applicant Seeks a Position Working With Youth and/or Children:

4. Do you believe the applicant is fully willing and able to make a commitment to work on a regular basis with children or youth?

Why or why not?

5. Are you aware of any problems or concerns that should or might limit or preclude this individual from working with children or youth?

If yes, please explain fully:

6. Would you recommend the applicant for placement in a setting such as ours (church setting working with children or youth), or do you feel he/ she may be more suited for another type of volunteer agency?

Please explain:

7. Please include any additional comments which may help in assessing the applicant's fitness for the position.

Signature of personal reference;_____

Date: _____