



Personal Reference

Applicant's Name:

Referee's Name:

Address:
.....

Postcode

Telephone

Email

How long have you known the candidate?

In what capacity

1. What do you consider are the candidate's main strengths & weaknesses?
Strengths:

Weaknesses:

2. Comment on the candidate's work with young people, children and/or families.

3. Do you know any reason why this candidate would be unsuitable to work with young people, children and/or families E.g. history of violence, sexual abuse, criminal record? If so please explain.

4. Comment on the candidate's Christian commitment and spirituality. What evidence do they show of faith? How has their faith been tested? In what ways have they developed a personal spirituality?

5. If the candidate were accepted which area/areas of personal/professional life do you think s/he will need to work on?

Signed
Date

Can we phone/email you if we wish to follow up anything? YES / NO

Tel No.

Please return to:

CYM Ireland
 Youth Link:NI
 Farset Enterprise Park
 638 Springfield Road
 BELFAST
 BT12 7DY

Phone 028 9032 3217
 E-mail lyndsay@youthlink.org.uk (until 12 February 2016)
 or info@youthlink.org.uk (after 12 February 2016)

E-mail – this form can be e-mailed provided it is sent from the referee's e-mail account.

“Referees should note that a copy of this reference may be made available to any Professional Practice Agency that offers, or considers offering, a place to enable the student to undertake the professional practice element of the course. Also, if required, the information contained in this reference will be released to the student.”