

FORM 4 REFERENCE LETTER AND FORM

Dear

Re: Reference Request for **[Name of Applicant]**

The above named person has applied to be a worker with the children/young people/vulnerable adults at*[name of place of worship/organisation]*

As I am sure you are aware, before we can accept anyone to work with children/ vulnerable adults*, whether on a voluntary or paid basis, we must be sure that they are suitable. This applicant has given your name as a referee.

I would be grateful if you could give your opinion of the person's suitability for the post by completing the enclosed form and return it in the pre-paid envelope as soon as possible. A description of the job/role is enclosed.

Please note that this position is exempt from Section 4(2) of the Rehabilitation of Offenders Act 1974 (Exemptions Order as applicable in the UK). It is not, therefore, in any way contrary to the Act to reveal any information you may have concerning convictions which would otherwise be considered "spent".

Any information you are able to give will be kept in strictest confidence and used only in consideration of the suitability of the applicant for this position.

Should you require any further information do not hesitate to contact

on telephone number

May I take this opportunity to thank you for your help in this matter.

Yours sincerely,

**Reference Form for those working with children or vulnerable adults
Private and Confidential.**

REFERENCE FOR: POSITION APPLIED FOR:

Your name:

Occupation:

How long have you known this person?

In what capacity?

1. Does this applicant have any previous experience of looking after or working with children and young people/vulnerable adults* or with any other groups in a responsible or caring capacity?

Yes No If yes, please give details

2. The position for which this person is being considered gives substantial access to children and young people/ vulnerable adults. * To your knowledge, is there any reason why this person should not be entrusted with care of children/vulnerable adults? If so, please provide details.

Yes No If yes, please give details

**delete as applicable*

3. Does the applicant have any health problems, mental or physical, which might affect the person's work with children/vulnerable adults?

Yes No If yes, please give details

If yes, please explain including details of any additional support that the applicant may need to work with children and young people, vulnerable adults e.g. would this person be able to work unsupervised?

Please use additional sheets if necessary

Signed:

Date:

Thank you for your help.

Please return this form to: