**TEMPLATE 5**

**REFERENCE FORM FOR POSITIONS WORKING WITH YOUNG PEOPLE IN LACROSSE**

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| **Name of candidate:** |
| **Name of club/organisation:** |
| **Position applied for:** |

The above-named person has expressed an interest in working as a volunteer with our club and has given your name as a referee.

 The post involves regular work with young people in a position of trust. As an organisation committed to the welfare of and protection of young people, we are anxious to know if there is any reason at all to be concerned about this applicant working with young people.

If you are happy to complete this reference, any information will be treated with due confidentiality and in accordance with relevant legislation and guidance. Information will only be shared with the person assessing the candidate's suitability for the post, if he/she is offered the position in question.

We would appreciate you being candid, open, and honest in your evaluation of this person.

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| 1. **How long have you known this person?**
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| 1. **In what capacity?**
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| 1. **Please comment on the above named person’s suitability to work with children.**
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| 1. **Please rate this person on the following – please tick one box for each statement:**
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|  | **Poor** | **Average** | **Good** | **Very Good** | **Excellent** |
| **Responsibility** |  |  |  |  |  |
| **Maturity** |  |  |  |  |  |
| **Self-motivation** |  |  |  |  |  |
| **Ability to motivate others** |  |  |  |  |  |
| **Time Management** |  |  |  |  |  |
| **Organisation** |  |  |  |  |  |
| **Energy** |  |  |  |  |  |
| **Trustworthiness** |  |  |  |  |  |
| **Reliability** |  |  |  |  |  |

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| 1. **This post involves substantial access to children. As an organisation committed to the welfare and protection of children, we are anxious to know if you consider the above-named person poses any risk to the welfare of children or young people?**
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| **Yes ** | **No ** |

**If you have answered YES, we will contact you in confidence.**

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| Signed: |
| Print Name: |
| Organisation: |
| Position: |
| Date: |
| Contact Number: |

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| **PLEASE RETURN TO:** |