



## Personal Reference Form

*This form cannot be completed by a member of your family. Completed reference forms will also be shared with your selected host family.*

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

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Referee's Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

### To the Referee:

Do you speak English?    Yes      No

1. Describe your relationship with the applicant.
2. How long have you known the applicant?
3. Had the applicant ever taken care of children under your care?    Yes      No

If yes, when was the last time the applicant cared for the children?

How old were the children under the applicant's care?



4. Why would the applicant be a good candidate to care for children in a foreign household?
  
  
  
  
  
  
  
  
  
  
5. In your opinion, could this applicant live and work in someone else's home? Why or why not?
  
  
  
  
  
  
  
  
  
  
6. Have you ever witnessed any unusual conditions with regard to this applicant?
  
  
  
  
  
  
  
  
  
  
7. What are some of the applicant's strongest qualities?
  
  
  
  
  
  
  
  
  
  
8. What are the applicant's weaknesses/ areas of improvement?
  
  
  
  
  
  
  
  
  
  
9. Please rate the applicant in the following areas:

*Ex= Excellent, Gd= Good, Fr= Fair, Pr= Poor*

Overall attitude:	Ex	Gd	Fr	Pr
Attitude towards children:	Ex	Gd	Fr	Pr
Ability to relate to children:	Ex	Gd	Fr	Pr
Ability to relate to adults:	Ex	Gd	Fr	Pr
Ability to follow directions:	Ex	Gd	Fr	Pr
Maturity:	Ex	Gd	Fr	Pr
Independence:	Ex	Gd	Fr	Pr
Patience:	Ex	Gd	Fr	Pr
Honesty:	Ex	Gd	Fr	Pr
Composure:	Ex	Gd	Fr	Pr



10. Please indicate the responsibilities that you believe the applicant could be entrusted with:

Children’s meal preparation:	Yes	No	N/A
Bathing children:	Yes	No	N/A
Children’s laundry:	Yes	No	N/A
Care for sick children:	Yes	No	N/A
Care for twins:	Yes	No	N/A
Driving children:	Yes	No	N/A
Planning children’s activities:	Yes	No	N/A
Care of infants (over 3 months old):	Yes	No	N/A
Care of multiple children/different ages:	Yes	No	N/A
Helping children with homework:	Yes	No	N/A

Additional comments:

I, the referee, attest that what is written here is my own words and opinion with regard to the applicant.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_