



Safe Families for Children

Host Family Reference

Date: _____

Thank you for your willingness to be a reference for an applicant desiring to become a volunteer host family through the Safe Families for Children movement. Please return this form via mail or fax.

Applicant Name: _____

Your Name: _____ Address: _____

Phone #: _____ Email Address: _____

1. How long have you known the applicant? _____
2. In what capacity is your relationship? Colleague Supervisor Friend Pastor Other: _____
3. How frequent is your contact with this individual? _____
4. Rate **Attributes** that best describe this applicant, within the limits of your experience; or check 'Not Known'.

| Attribute | Excellent | Good | Average | Fair | Poor | / | Not Known |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|--------------------------|
| Ability to interact, | | | | | | | |
| with children: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| with other adults: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Integrity: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Attitude: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Dependability: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Judgment: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Emotional stability: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Responsibility: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Moral conduct: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Compassion: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |
| Relating to others who are different: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> |

5. Please comment on the applicant's suitability for providing a safe and nurturing home for children.

6. List any reservations about recommending this applicant? _____

Reference signature: _____ Date: _____