

CHILDREN'S MINISTRY REFERENCE

Applicant and Serving Role:

Applicant: _____ Serving Post: _____

Relationship and Recommendation:

How long have you known the above person? _____ Years _____ Months

In what capacity do you know them? _____

Do you have any experience of their work with children/young people?

Yes ☐ No ☐

Do you have recommend him/her as being suitable to work with children/young people?

Yes ☐ No ☐

Is there any other supporting information you may consider helpful?

Your details:

Your Name: _____

If you are a member of a previous church that the applicant attended, please give the Church name and contact details:

Church Names: _____

Contact: _____

Signature: _____ Date: _____