



DIOCESE OF LEEDS

(Please refer to the enclosed Role Description when completing this form & complete in **BLOCK CAPITALS** using black ink)

Role on behalf of: (Parish/Order/Organisation) _____

Role(s) Applied For: _____

Name of Applicant:

Question 1 of 7

Can the information you provide in this reference be shared with the applicant? Yes
(Please tick) No

Question 2 of 7

In what capacity do you know the applicant?

Question 3 of 7

How many years have you known the applicant?

Question 4 of 7

To your knowledge has the applicant any experience relevant to the Role Description? Yes
(Please tick) No

Question 5 of 7

On a scale of 1 to 4 (where 4 is the highest), in your opinion is the applicant (Please circle)

Caring	1 (lowest)	2	3	4 (highest)
Trustworthy	1 (lowest)	2	3	4 (highest)
Reliable	1 (lowest)	2	3	4 (highest)

Question 6 of 7

Do you consider this applicant to be suitable to work with children, young people and vulnerable adults? (Please tick) Yes
If no, please give details. No

Question 7 of 7

If you have any other comments or concerns regarding the suitability of this applicant for this role in the Church, please give details using the space overleaf.

PLEASE COMPLETE YOUR DETAILS

Full Name: _____

Signed: _____ **Dated:** _____

Thank you for taking the time to complete this form