

Form 7

REFERENCE CHECK TELEPHONE SCRIPT



Applicant's Details:

Name: Position applied for:
Referee Contacted: Relationship:
Telephone No: Date: / /
Reference Checked by:

Reference Check Guidelines:

- a. Introduce yourself and provide background information about why you are calling.
- b. Advise information will be treated confidentially.
- c. Establish referee's relationship to applicant:
- d. How long has referee known the applicant?

1. How do you think the applicant is suited to the role they seek in this organisation? Would you appoint them to this role?

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2. Please comment on the strengths of the applicant.

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3. Have you ever seen the applicant deal with a difficult situation and, if so, how did they manage it?

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4. Everyone has aspects of themselves which they need to develop or modify. Please comment on areas in which this applicant may need to grow or develop.

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[Please note - The following questions focus on child protection issues]

5. Please comment on the applicant's skills and characteristics that would make them suitable to lead and/or care for children or young people.

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6. Please describe your experience of the applicant in situations involving the care and safety of children or young people.

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7. To your knowledge has the applicant ever engaged in any inappropriate behaviour or what might be deemed abuse?

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8. How strongly would you recommend this person as a suitable person to care for and / or lead children or young people?

<input type="checkbox"/> Not at all	<input type="checkbox"/> Recommend
<input type="checkbox"/> With reservations	<input type="checkbox"/> Strongly recommend
<input type="checkbox"/> Neither Yes or No	<input type="checkbox"/> Don't Know / Can't say

9. Is there any other relevant information that you think we should know about the applicant?

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Comments from interviewer

Referee's level of enthusiasm for applicant? *(please circle)* HIGH MEDIUM LOW

Did information flow freely, without hesitation? *(please circle)* YES NO

Overall impression of referee:

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Reference check completed by:

Signature: DATE: / /

PLEASE KEEP THIS SCRIPT ON FILE WITH THE APPLICANT'S FORM 1
