



FIRST LOVE CHRISTIAN ACADEMY
P.O. BOX 109
WASHINGTON, PA 15301
724-225-FLCA
<http://www.firstlovechristianacademy.com>
flca@firstlovechristianacademy.com

PERSONAL REFERENCE FORM

Our school has received an application for a _____ position from _____ and would appreciate your opinion on the applicant's character, personality, and ability to fill this position. Attached is a signed authorization form whereby the applicant releases you from liability if you provide this reference. Applicant has also agreed that we have the right to keep your reference confidential. Thank you for your help.

_____ Name _____ Date

HOW LONG HAVE YOU KNOWN THE APPLICANT? _____

IN WHAT CAPACITY? (E.G., PASTOR, TEACHER, FRIEND) _____

HAS THIS APPLICANT DEMONSTRATED A REAL COMMITMENT TO CHRISTIAN LIVING BOTH ON AND OFF THE JOB SITE? WOULD HE/SHE BE A GOOD CHRISTIAN ROLE MODEL FOR OUR STUDENTS?

HAVE YOU NOTED DEPTH OF CONVICTIONS AS DEMONSTRATED BY HONESTY, FAIRNESS, RESPECT FOR AUTHORITY, DILIGENCE, COMPASSION, TACT, OR OTHER CHRISTIAN VIRTUES?

LIST MAIN CHARACTER AND PERSONALITY STRENGTHS.

ARE THERE CHARACTER OR PERSONALITY WEAKNESSES THAT DIMINISH THIS APPLICANT'S EFFECTIVENESS AS A CHRISTIAN ROLE MODEL?

DO YOU CONSIDER THE APPLICANT SELF-MOTIVATED? _____

DO YOU CONSIDER THE APPLICANT TO BE WILLING TO DO EXTRA TASKS IF NEEDED?



BECAUSE WE PUT SUCH A HIGH PRIORITY ON THE SAFETY OF OUR STUDENTS, WE ASK SOME PRETTY DIRECT QUESTIONS REGARDING MISCONDUCT. WE ASK THESE QUESTIONS ON ALL REFERENCE CHECKS.

ARE YOU AWARE OF ANY INSTANCE IN WHICH THE APPLICANT SEXUALLY HARASSED ANOTHER INDIVIDUAL OR WAS ACCUSED OF DOING SO? YES NO

HAS ANYONE, TO YOUR KNOWLEDGE, EVER BROUGHT OR DISCUSSED BRINGING A CIVIL OR CRIMINAL CLAIM AGAINST THE APPLICANT ALLEGING PHYSICAL OR SEXUAL ABUSE BY HIM/HER? YES NO

DID YOU, AS HIS/HER EMPLOYER, EVER DISCIPLINE OR REPRIMAND HIM/HER FOR ANY REASON RELATED TO PHYSICAL OR SEXUAL ABUSE, OR SEXUAL IMPROPRIETY? YES NO

DO YOU HAVE ANY REASON TO BELIEVE THAT HE/SHE SHOULD NOT BE WORKING AROUND CHILDREN, THOSE IN NEED OF COUNSEL, OR ANY OTHER INDIVIDUAL? YES NO

DO YOU HAVE ANY REASON TO BELIEVE THAT HE/SHE IS NOT TOTALLY HONEST OR THAT HE/SHE CANNOT BE TRUSTED IN HANDLING FUNDS? YES NO

FOR REASONS THAT YOU MAY PREFER TO KEEP CONFIDENTIAL, SHOULD WE ENLARGE OUR SEARCH FOR THE RIGHT PERSON FOR THIS POSITION BEYOND THIS PARTICULAR APPLICANT? YES NO

ARE YOU COMFORTABLE HAVING THE APPLICANT AS A MENTOR FOR YOUR CHILD? YES NO

COMMENTS? _____

YOU MAY CALL 1-800-FIRSTLV IF YOU WOULD PREFER, OR WRITE YOUR COMMENTS BELOW

YOUR NAME: _____ PHONE: _____

YOUR ADDRESS: _____

THANKS FOR YOUR HELP AND COOPERATION!

