

**Detroit Annual Conference of The United Methodist Church  
Form for Reference Check**

References are required for each applicant prior to their certification to work with children, youth, or vulnerable persons. The information that you share will be held in strict confidence. Please send the completed reference to your **Dean** or **Camp Director**.

*Applicant: Please fill in name and address or provide an addressed, stamped envelope.*

Applicant name: \_\_\_\_\_

Applicant address: \_\_\_\_\_ City & State \_\_\_\_\_ Zip \_\_\_\_\_

Reference name: \_\_\_\_\_

Reference address: \_\_\_\_\_ City & State \_\_\_\_\_ Zip \_\_\_\_\_

Reference phone and e-mail: \_\_\_\_\_

1. What is your relationship to the applicant?
2. How long have you known the applicant?
3. How well do you know the applicant?
4. How would you describe the applicant?
  
5. How would you describe the applicant's ability to relate to children, youth, or vulnerable persons?
  
6. How would you describe the applicant's ability to relate to adults?
  
7. How would you describe the applicant's leadership abilities?
  
8. Do you know of any characteristics that would negatively affect the applicant's ability to work with children, youth, or vulnerable persons?
  
9. Do you have any knowledge that the applicant has ever been convicted of a crime? If so, please describe.
  
10. Please list any other comments you would like to make: (continue on reverse if necessary)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

We appreciate your time in answering these questions as we in the Detroit Annual Conference of The United Methodist Church strive to do everything we can to protect our children, youth, and vulnerable persons. Thank you.