



Team Mpumalanga

CONFIDENTIAL REFERENCE

To be completed by applicant:

Name: Surname:

I have chosen this person as a refernce because:

To be completed by the referee

Name	<input type="text"/>	Relation	<input type="text"/>
Telephone: Home:	<input type="text"/>	Work:	<input type="text"/>
Cell:	<input type="text"/>		
Address:	<input type="text"/>		
	Postal code:	<input type="text"/>	

To the referee: Please note that the application cannot be considered until we have received this recommendation. Serious consideration will be given to your comments, therefore, please complete this form carefully. This recommendation should be returned **directly** to YFC Mpumalanga.

Fax: 086 660 6445 or email: admin@yfcmpu.co.za

Please indicate where applicable

How long have you known this applicant?	<input type="text"/>
How well do you know this applicant?	<input type="text"/>
Very Well	<input type="text"/>
Well	<input type="text"/>
Casually	<input type="text"/>

Please rank the applicant in the following areas:

	Excellent	Above Average	Average	Below Average
Ability to cope with stress	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Ability to follow	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Christian Character	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Concern for others	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Co-operation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Emotional Stability	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Flexibility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Initiative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Leadership	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Perserverance	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Stewardship	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Self Discipline	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Responsibility	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Team Mpumalanga

Has the applicant, on any occasion, proven to be unreliable, dishonest or of questionable character?

If yes, please explain.

In your opinion, which of the following best describe the applicant's Christian experience?

Mature	<input type="checkbox"/>	Contagious	<input type="checkbox"/>	Genuine & Growing	<input type="checkbox"/>
Over emotional	<input type="checkbox"/>	Superficial	<input type="checkbox"/>	Other	<input type="text"/>

Please comment briefly on applicant's family background.

Does the applicant display prejudice towards other races or nationalities?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Do not know	<input type="checkbox"/>
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If yes, please explain.

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Has the applicant ever been involved in the occult, drug or alcohol abuse, or sexual immorality?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Do not know	<input type="checkbox"/>
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If yes, please comment whether they have received ministry in this area?

Does the applicant smoke?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Do not know	<input type="checkbox"/>
Does the applicant respond well to authority?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Do not know	<input type="checkbox"/>
Is the applicant financially responsible?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Do not know	<input type="checkbox"/>

Do you recommend this applicant?

Wholeheartedly	<input type="checkbox"/>	With reservation	<input type="checkbox"/>	Not at all	<input type="checkbox"/>
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If not at all, please comment

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Is there anything else concerning the applicant that you believe is necessary to bring to our attention?

I declare that to the best of my knowledge the contents of this recommendation are correct.

Signed :	<input type="text"/>	Date:	<input type="text"/>
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