



1<sup>st</sup> Med Ltd  
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**REFERENCE REQUEST**

Date: .....

Staff Name: .....

Date of Birth: .....

Post Applied: .....

Referee's Name: .....

**Questions:**

1. How long have you known the applicant? \_\_\_\_\_
2. From: ..... To:.....
3. In what capacity do you know the applicant? \_\_\_\_\_

<b>Please Circle Appropriately</b>	<b>Excellent</b>	<b>Good</b>	<b>Fair</b>	<b>Poor</b>
Trustworthiness, Conduct, and General Character	1	2	3	4
Attendance and Reliability	1	2	3	4
Punctuality	1	2	3	4
inter-Personal Skills	1	2	3	4
Use of Initiative	1	2	3	4
Problem Solving Ability	1	2	3	4
Willingness to Work Flexibly	1	2	3	4
Managing Own Time	1	2	3	4
Motivation, Effort and Application to Task	1	2	3	4
General Approach to Service Users, Colleagues, Professionals	1	2	3	4
Communication Skills (verbal)	1	2	3	4
Communication Skills (Written)	1	2	3	4
Attention to Detail	1	2	3	4
Acceptance of Supervision by Seniors	1	2	3	4
Management of Stress	1	2	3	4

**Working with Vulnerable Adults**

**The applicant will work with vulnerable older people and will be expected to protect their rights and maintain their dignity and promote their independence at all times**

Have you any concerns that the applicant may not be able to work in a professional and appropriate way with vulnerable adults? .....

Have you any -reason to believe that the applicant may pose an actual or potential risk to vulnerable adults?

.....

Have you any reason to doubt the applicant's suitability for employment with vulnerable clients? If yes please comment. :.....

*This is to confirm that the statements made is true on behalf of the referee*

Print name:..... Designation:.....

Signature:.....Date:.....