

I have applied to Calumet Lutheran Ministries for employment during 2021. I desire that they be fully advised of my record with former employers, teachers, clergy, and others who know my competence. I especially want them to be knowledgeable of my ability to provide people, especially children, with a safe and wholesome environment. I, therefore, respectfully request that you furnish the information they seek from you, and I hereby release you from any and all liability of damages for providing the information requested.

Position Applying for:

Date:

Applicants Name:

(please print)

(signature)

Dear Employer, former Employer, Teacher, Guidance Counselor:

Thank you for taking the time to complete this reference form. Calumet employs hundreds of people of all ages for a variety of positions. Your evaluation, and especially your comments, will help us to place the candidate in the best situation for him or her and for the ministry which takes place at Calumet. We encourage your frankness so that if this person is chosen, we can provide support where necessary. **If you have provided a reference for this person in the past, and nothing has changed, please indicate that by writing "see previous references" and signing where indicated.** Thank you.

Based on your knowledge of the applicant, please check the appropriate column. (E)xcellent (G)ood (F)air (P)oor
Your promptness in returning this form will aid the applicant in getting the position of their choice.

	E	G	F	P		E	G	F	P
Speech and manner					Reaction to criticism				
Appearance					Ability to work with others				
Promptness					Courtesy				
Physical Energy					Ability to inspire others				
Overall emotional maturity					Leadership ability				
Sense of humor					Communicating w/children				
Attention to detail					Capacity for fun				
Initiative w/o supervision					Ability to work to potential				

Any additional comments you would like to make about the applicant may be written on the reverse side of this page.

List any special skills which have been demonstrated by the applicant:

Does the applicant have a medical or psychological condition of which we should be aware? Please explain?

What are the weak points of this applicant?

To your knowledge, has this person been found guilty of any crime by a court of law?

This is the most crucial question on this form. Please be frank. Would you be willing to have your own child under the direct, close, and constant supervision of the applicant? Please state your reasons.

How long have you known the applicant?

Signature, printed name/title, and date

Business name, address, and telephone:

Please return to: Adam Fales
 Calumet Lutheran Ministries, P.O. Box 236, West Ossipee, NH 03890
 Phone: 603-539-4773 x210 Fax: 603-539-5343 or scan and email: adam@calumet.org