Protecting
Vulnerable Adults

REFERENCE FORM

If you would like to share information by telephone, please call [Staff Member] at (XXX)XXX-XXXX.

Name of Applicant: _____ Date: _____

Position Applicant is seeking: _____

Name of Reference:_____

Vulnerable Adult: For the purpose of this Form, the term *vulnerable adult* means an adult with a special need, intellectual disability or developmental disability.
You are invited to redefine this term to better fit your program or use.

1. How long have you known this applicant? _____
2. What is your relationship to the applicant? _____
3. What strengths and weaknesses have you observed in this applicant?

   _____

   _____

   _____

4. How would you rate the applicant's ability to work with and relate to vulnerable adults?

   _____ Above satisfactory _____ Satisfactory _____ Below satisfactory

   Have you seen the Applicant working with vulnerable adults firsthand? Can you give an example of how the Applicant relates to vulnerable adults?

   _____

   _____

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5. Do you know if the applicant has worked with vulnerable adults in the past? If so, what type of work or service with vulnerable adults has the applicant provided? (Example: coach, reading mentor, etc.)

_____

_____

_____

6. We are looking for someone who can stay calm and level even under frustrating conditions with a vulnerable adult. How would you rate the Applicant's ability to be patient and calm?

_____ Above satisfactory _____ Satisfactory _____ Below satisfactory

7. Have you ever known the applicant to have harsh or abusive interaction with a child or vulnerable adult?

_____

_____

_____

8. Are you aware of any reason the applicant would pose a danger to a child or vulnerable adult?

_____

_____

_____

9. Are you aware of any instance where the applicant has been reprimanded or investigated for harsh or abusive interaction with a child or vulnerable adult?

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_____

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10. Would you be comfortable placing one of your own children or a family member in the care of the applicant? Why or why not?

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_____

_____

11. What are the applicant's hobbies and recreational activities?

_____

_____

_____

12. We desire to hire individuals who can give support and understanding to the vulnerable adults we serve. How would you rate the applicant's ability to be genuinely supportive and understanding to a vulnerable adult in need?

_____ Above satisfactory _____ Satisfactory _____ Below satisfactory

13. Think of a time when the applicant was able to show genuine concern for another person who needed comfort. Tell me about that time.

_____

_____

_____

14. Please describe the applicant's moral character and integrity, including relevant examples that come to mind.

_____

_____

_____

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15. In your opinion, does the applicant have the ability to get along with others and be part of a team? If so, please share examples that come to mind.

_____

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16. In your opinion, does the applicant have and take initiative? If so, please share examples that come to mind.

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17. In your opinion, is the applicant dependable? If so, please share examples that come to mind.

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18. In your opinion, does the applicant have leadership abilities? If so, please share examples that come to mind.

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_____

19. In your opinion, does the applicant have the ability to work and interact well with individuals with intellectual and developmental disabilities? If so, please share examples that come to mind.

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_____

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20. In your opinion, does the applicant have the ability to train, mentor or guide an individual with intellectual and/or developmental disabilities, while acting with respect and compassion? If so, please share examples that come to mind.

_____

_____

_____

21. Do you have additional comments or questions?

_____

_____

_____

Signature of reference: _____ *Date:* _____

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