**Appendix (2)**

**TELEPHONE REFERENCE CHECKLIST VERIFICATION**

Name of Referee: ……………………………………

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ISSUE | YES | NO | DON’T KNOW | COMMENTS |
| Do you believe the candidate can proactively safeguard children? |  |  |  |  |
| Do you have any concerns about the candidate’s practice or behaviour? |  |  |  |  |
| Do you believe the candidate will offer consistency within their childcare practices? |  |  |  |  |
| Is the candidate an honest and reliable person? |  |  |  |  |
| Do you have any concerns about any possible risk the candidate may pose to children or others? |  |  |  |  |
| Do you believe the candidate has the appropriate knowledge and skills to safely manage in this post? |  |  |  |  |
| Any other comments |  |  |  |  |