



110 South Delsea Drive, Clayton, NJ 08312
Phone: (856) 881-5454; Fax: (856) 881-6439

Safe Kids Volunteer Reference Form

CONFIDENTIAL

Name of Applicant: _____

Name of Reference: _____

Questions:

1) How long have you known the applicant? _____

2) To the best of your knowledge has the applicant ever been convicted of child abuse or sexual molestation? (if yes, please explain) _____

3) To the best of your knowledge has the applicant ever been convicted of a criminal offence? (if yes, please explain) _____

4) Can you think of any reason why the applicant should not be permitted to serve as a volunteer in our church ministries to children and youth? (if yes, please explain) _____

Additional Comments:

Signature: _____ Date: _____