

Child and Youth Care Programs

**REFERENCE FORM
(NON-CONFIDENTIAL)**

TO BE COMPLETED BY THE APPLICANT: Please complete this section before sending this form to a referee of your choice. It is recommended that you utilize referees who are professionally employed, or who volunteer in the Child and Youth Care or Human Services field. Referees have supervised you in your work (i.e. paid work, volunteer work, coaching, child-minding, teaching, leaders-in-training etc.) with children, youth, and/or families.

Surname _____	Given Names _____	Previous Names (if applicable) _____
Phone Number: (_____) _____	Student Number (if known) _____	
Relationship to Referee: _____		

TO BE COMPLETED BY THE REFEREE:

The above applicant has applied to pursue academic education in the Child and Youth Care Program in the Faculty of Health and Human Services at Vancouver Island University. As part of the application process, two referees are asked to complete this form.

Please complete this form and return it **directly** to:

Admissions | Registration Centre
Vancouver Island University
900 Fifth Street
Nanaimo, BC V9R 5S5
Email: Donna.Kist@viu.ca
Fax: 250-740-6479

Name: _____ Title: _____

Institution: _____ Phone: _____

Address: _____

City: _____ Postal Code: _____

Your position in relation to the applicant: _____

Position the applicant held: _____

Dates of employment from: _____ to: _____

Place of employment: _____

Signature: _____ Date: _____

1. Briefly describe your history and relationship to the applicant.

2. Describe, briefly, your understanding of the practice field of Child and Youth Care and your connection to the field.

3. The course work in the Child and Youth Care program is academically and personally demanding. Comment on your opinion of the applicant's readiness and suitability to enter this field of study at this time.

4. Describe the qualities that you believe this person would bring to studies related to working with children, youth and families and their eventual practice in the field of Child and Youth Care.

Comments: _____
