



**Central Alberta Youth Unlimited / YFC**

Central Office: 5025 – 50 Street Lacombe, AB T4L 1X9  
 Phone: 403-789-CAYU  
 Email: info@cayu.ca  
 Web: www.cayu.ca

## CONFIDENTIAL REFERENCE FORM

Applicant Name: \_\_\_\_\_

**TO BE COMPLETED BY REFERENCE:**

Please complete and return to Central Alberta Youth Unlimited by mail to 5025-50 Street, Lacombe, AB T4L 1X9, or by e-mail to info@cayu.ca. **Do not return to applicant.**

	Superior	Above Average	Average	Below Average	No Basis for Judgment	Comments (Additional Space Below)
Kindness & generosity						
Moral integrity						
Perseverance						
Self-discipline						
Desire to serve God						
Spiritual influence on others						
Spiritual maturity						
Theological insight						
Leadership potential						
Plan & goal oriented						
Punctuality						
Self- initiative						
Wise use of time						
Working with others/ teamwork						
Teachable servant spirit						
Able to adjust to change						
Able to work through problems						
Able to handle confrontation productively						
Reputation in community						

How long, and in what capacity have you known the applicant?

What do you consider to be the applicant's greatest strengths?

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**We see the hope and potential in every young person.**



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What areas of the applicant's life would you say need growth?

To your knowledge, does the applicant have a personal relationship with Christ?  Yes  No  
If 'yes', what evidence have you seen of the applicants spiritual maturity and relationship with Christ?

Have you had opportunity to observe the applicant work with youth?  Yes  No  
If 'yes', please comment on the applicant's ability to build relationships, provide leadership and/ or relate to the youth they were working with.

Would you feel comfortable with this applicant caring for your own children?  Yes  No  
Why/ Why not?

Would you recommend this applicant for volunteer Christian ministry specific to youth?  
 Enthusiastically  Fairly Strong  With Reluctance  
 Strongly  Without Enthusiasm  Don't Recommend

As there anything else you feel would be valuable for us to know in relation to this applicant's ability to serve alongside the Central Alberta Youth Unlimited Team?

May we contact you if we have any further questions?  Yes  No

Preferred contact: Email Home Phone Cell Phone

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

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