

Reference Request Form



| Reference for: | | | | | | | | | |
|---|--------------|---|---------------------------|-------------|------------|-----------------|----------|--|--|
| Please state the capacity in which you know or knew the applicant, including the place of work: | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| From | То | Role/Job Title of | Your role | Salary | Age range | | | | |
| | | applicant | | | taught/ı | <u>responsi</u> | bilities | | |
| | | | | | | 1 | 1 | | |
| | • | pplicant's employer? | | | | Yes | No | | |
| | _ | /intending to leave this | • | | | ocation, | change | | |
| of role, p | ersonal fac | ctors, dismissal (state g | rounds), compromise | agreemen | t | | | | |
| | | | | | | | | | |
| Mandal va | | andiana? | | | | Vac | No | | |
| - | | oy the applicant? – i.e. number of days lo | est due to sickness in la | act 2 years | | Yes | No | | |
| | | Details of any discipling | | | | 22000) 2 | nnlind | | |
| • | • | which a disciplinary in | | | • | - | pplied | | |
| to the ap | piicarit ioi | willer a discipilitary in | vestigation, warning or | 3011011 | is current | • | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Details and outcome of any disciplinary procedures to which the applicant has been subject relating | | | | | | | | | |
| to the safety & welfare of children . | | | | | | | | | |
| | • | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Details & outcome of any substantiated allegations regarding the applicant's behaviour towards | | | | | | | | | |
| children or young people or their safety and welfare. | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | , | 1 | | |
| - | | y reason why the applic | | Yes | | No | | | |
| | | ith children? If yes, plea | | | | | | | |
| Please add or attach any additional information which you consider is relevant to the appointment | | | | | | | | | |
| panel. | | | | | | | | | |
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| Please complete the page overleaf | | | | | | | | | |



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| Recommendation in terms of suitability for post applied for: | | | | | | | |
|--|-----------------|--|--|--|--|--|--|
| Recommended without reservation | Not recommended | | | | | | |
| Recommended with the following reservations: | | | | | | | |
| Reference provided by: | | | | | | | |
| Name | Job Title | | | | | | |
| Signature | Date | | | | | | |
| (electronic signature is acceptable at current time) | | | | | | | |

Kindly email to:

bursar@eastbrook-academy.org

If you wish to speak to us about the reference, kindly call Mr Graeme Miles on (01273) 874050