

# WRITTEN REFERENCE FOR ASSISTEDCARE SERVICES APPLICANT

This is a reference for \_\_\_\_\_ of \_\_\_\_\_  
Name of Applicant Address of Applicant  
\_\_\_\_\_ whom I have known for \_\_\_\_\_ in the capacity of \_\_\_\_\_  
City State Zip

\_\_\_\_\_  
(Friend, Co-Worker, Employer, etc) NOT A RELATIVE

I know this person:  Very Well  Casually  Not Well Enough to Give a Reference

Please answer the following questions:

1. Does the applicant have or show any signs of serious health, alcohol, or drug problems?  Yes  No

If Yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

2. Can you attest to the good character, maturity, and sound judgment of the applicant?  Yes  No

If No, please explain: \_\_\_\_\_  
\_\_\_\_\_

3. How would you assess the applicant's ability to provide personal care, chore and/or respite services to the disabled or elderly adults?

Check one:  Excellent  Good  Fair  Poor

4. List those qualities which you believe will (or will not) enable the applicant to work successfully with the disabled or elderly:

\_\_\_\_\_  
\_\_\_\_\_

5. If a disabled or elderly person needed personal care, chore or respite services, how do you feel about the applicant providing services for him / her?

Very Enthusiastic  Somewhat Enthusiastic  Neutral  Worried

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Print Name of Reference Signature of Reference Date Area Code Telephone Number

\_\_\_\_\_  
Address of Reference City State Zip Code