

CoramBAAF Consent to Checks and References (for use with Form C, Form F, and Form PAR)

APPLICANT 1	
Full name	
Date of birth	
Previous name(s)	

APPLICANT 2	
Full name	
Date of birth	
Previous name(s)	

CHILDREN (UNDER 18)	
Full name	Date of birth

CURRENT ADDRESS	
DATE FROM	

Please use a separate sheet to provide previous addresses with dates the applicant lived at them. Note: the fostering service or adoption agency is permitted to amend this box to specify how far back the applicant is required to go with previous addresses in order to comply with their policy.

CoramBAAF Consent to Checks and References (for use with Form C, Form F, and Form PAR)

APPLICANT CONSENT	
<ul style="list-style-type: none"> • I consent to [INSERT NAME]_____ fostering service/adoption agency making written and/or verbal checks with the organisations and individuals indicated below • I consent for checks to be made on my children with these organisations and individuals as appropriate. • I have consulted with and sought the views of my children according to age and understanding, and they have no objection to these checks being undertaken. 	

- Criminal record check
- Local authority for current address
- Local authority for previous addresses
- Police service/state embassy for another country where lived
- Current employer (including voluntary positions)
- Previous employers (including voluntary positions) where the work involved children or vulnerable adults
- Previous fostering services or adoption agencies
- Schools and colleges currently attended by my/our children
- Health visitors currently allocated to my/our children
- NSPCC
- Personal referees (as listed in my/our application form)
- Children, including adult children
- Former partners

Name	
Signature	
Date	

Name	
Signature	
Date	

**CoramBAAF Consent to Checks and References
(for use with Form C, Form F, and Form PAR)**

OTHER ADULT CONSENT

NAME OF ADULTS CURRENTLY OR FORMERLY LIVING AT THE ADDRESS	
Full name	Date of birth

CONSENT
<ul style="list-style-type: none"> I consent to a local authority check and/or NSPCC check being undertaken for the above address or addresses using my name.

Name	
Signature	
Date	

Name	
Signature	
Date	

Name	
Signature	
Date	

CoramBAAF Personal Reference
(for use with Form C, Form F, and Form PAR)



NAME OF APPLICANT/S

PERSON COMPLETING THE REFERENCE	
Name	
Address	
Email	
Telephone	

How long have you known the applicant/s and in what capacity? How frequently do you have contact with them now, and did you in the past?

What understanding or experience do you have in relation to fostering and/or adoption?

CoramBAAF Personal Reference
(for use with Form C, Form F, and Form PAR)



Please describe the personal qualities that you feel the applicant/s has that are relevant to fostering or adoption.

Large empty rectangular box for providing a personal reference. A large, light grey 'SAMPLE' watermark is diagonally overlaid across the box.

If applicable, please comment on the quality and stability of the adult relationships within the applicant's household.

Large empty rectangular box for commenting on adult relationships. A large, light grey 'SAMPLE' watermark is diagonally overlaid across the box.

**CoramBAAF Personal Reference
(for use with Form C, Form F, and Form PAR)**

**If the applicant/s has children living at home, how would you describe them?
How do think they might respond to living with a fostered or adopted child?**

SAMPLE

**What have you observed of the applicant's relationships with their own
children if they have them, and/or with other children?**

SAMPLE

**CoramBAAF Personal Reference
(for use with Form C, Form F, and Form PAR)**

Some fostered and adopted children will exhibit challenging behaviour. How well do you think the applicant/s would manage this?

What can you say about the ability of the applicant/s to manage stress?

Do you know anything that makes you think the applicant/s might not be suitable to foster or adopt?

Yes/No

Would you have any concerns about the safety or well-being of a child placed in their care?

Yes/No

Have you ever been aware that the applicant/s has used smacking, physical chastisement, or any inappropriate discipline to manage children's behaviour?

Yes/No

If you have answered 'yes' to any of these questions, please provide full details in the section on any other information.

**CoramBAAF Personal Reference
(for use with Form C, Form F, and Form PAR)**

Please comment on the applicant's ability to work effectively with others as part of a team.

Empty response box for comment on the applicant's ability to work effectively with others as part of a team.

Please comment on the applicant's honesty, trustworthiness and ability to keep sensitive information confidential.

Empty response box for comment on the applicant's honesty, trustworthiness and ability to keep sensitive information confidential.

What do you think will be the biggest challenge for the applicant/s in fostering or adopting a child? Are there any areas where you think the applicant/s might need support?

Empty response box for comment on the biggest challenge for the applicant/s in fostering or adopting a child and areas where they might need support.

**CoramBAAF Personal Reference
(for use with Form C, Form F, and Form PAR)**

Please provide any other information that you think is relevant (using an additional sheet if necessary).

Large empty box for providing additional information. A large diagonal watermark reading "SAMPLE" is overlaid across the page.

Please tick one of the following boxes to indicate your consent to sharing the information you have provided:

- I am happy for my reference to be shared with the applicant/s
- I wish for my reference to remain confidential
- There are parts of my reference that I want to remain confidential and would like to discuss this with you

Signature	
Date	

CoramBAAF Interview Record and Analysis
(for use with Form C, Form F, and Form PAR)



NAME OF PERSON INTERVIEWED

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DATE OF INTERVIEW

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RECORD OF MATTERS DISCUSSED

<p style="text-align: center; font-size: 48px; opacity: 0.2; transform: rotate(-30deg);">SAMPLE</p>

CoramBAAF Interview Record and Analysis (for use with Form C, Form F, and Form PAR)

AGREEMENT REGARDING ACCURACY OF RECORD

Please tick one of the following boxes:

I was interviewed on the date above and:

- This is an accurate record of our discussion
- There are aspects of this record that are not accurate (please explain using additional sheets as necessary)

Signature of interviewee	
Date	

SOCIAL WORK ANALYSIS

Name of assessor	
Signature of assessor	
Date	

CoramBAAF Home Safety Checklist

(for use with Form C, Form F, Form PAR, and Form FR)



This form is intended for completion by the assessing social worker in partnership with applicant/s for adoption, foster care or special guardianship or with foster carer/s as part of the foster carer review process. The assessing social worker should be familiar with CoramBAAF Practice Note 61, *Home Safety Checks in Fostering and Adoption* (2016) or the relevant chapter in *Checks and References in Fostering and Adoption* (Adams, 2017).

Name of applicants/carers	
Date of safety check	

FIRE SAFETY	Safe	N/A	Unsafe
Smoke alarms (BS EN 14604:2005) are fitted and working on every level of the house. Date tested:			
Smoke alarm batteries have been replaced within the last year. Date replaced:			
Chimney flues have been inspected and swept within the last year (smokeless fuel) or six months (wood/coal). Date:			
Matches and lighters are safely stored (locked away or at or above adult eye height).			
Escape routes are planned, appropriate and understood by household members (household fire plan).			
Keys to window locks are accessible to adults and responsible children and young people, but not other children.			
A fireguard (BS 8423: 2010) and/or spark guard is used as appropriate on open fires and solid fuel burners.			
Electricity sockets are not overloaded (should not exceed 13 amps).			
There is no evidence of scorched sockets, frayed wires or anything to suggest an electrical check is needed.			
Any electrical work has been completed by a qualified and registered electrician.			

CoramBAAF Home Safety Checklist (for use with Form C, Form F, Form PAR, and Form FR)

FALLS	Safe	N/A	Unsafe
Floors, stairs and outside spaces are well maintained, and free of obstacles and trip hazards.			
Lighting is appropriate throughout the home.			
Safety gates (BS EN 1930: 2011) are competently and securely fitted at the bottom of stairs.			
Consideration has been given to the use of competently and securely fitted safety gates (BS EN 1930: 2011) upstairs/elsewhere.			
Banisters are strong, with suitable gaps, not exceeding 6.5cm (ages 0–2) or 10cm with no horizontal rails or footholds for climbing (ages 2–5).			
Child resistant window restrictors are fitted, with the gap not exceeding 10cm (ages 0–5), and taking into account fire escape routes.			
Upper bunk beds have secure safety rails and ladders, and are not being used for children under the age of six.			
Pushchairs, buggies and high chairs are in good condition with straps and harnesses.			
Outdoor play equipment is safe and securely attached, and mounted over a suitable surface.			
Trampolines are fitted with a safety net enclosure.			

BURNS AND SCALDS	Safe	N/A	Unsafe
Carers understand the need to run cold water before the hot water into baths, or thermostatic mixing valves have been fitted (ages 0–5).			
Kettle cords are safely out of reach.			

CoramBAAF Home Safety Checklist
(for use with Form C, Form F, Form PAR, and Form FR)

Consideration has been given to keeping children out of the kitchen when cooking.			
A fireguard (BS 8423: 2010) is used on all types of fire to prevent young children being burned (ages 0–5).			
Consideration has been given to the dangers linked to hot drinks.			
Consideration has been given to the dangers linked to hair straighteners and irons.			
Consideration has been given to the dangers linked to sunburn.			

STRANGULATION AND SUFFOCATION	Safe	N/A	Unsafe
There are no blinds or curtains with cords that constitute a hazard.			
There are no hanging toys or draw-string bags that constitute a hazard.			
Plastic bags and nappy sacks are stored safely.			
Children are prevented from playing with rotary washing lines, ropes or cords.			
Cots are free from pillows, duvets, large toys and cot bumpers.			
Toys and other items with small parts are stored safely away from young children.			

CoramBAAF Home Safety Checklist (for use with Form C, Form F, Form PAR, and Form FR)

POISONING	Safe	N/A	Unsafe
Carbon monoxide alarms are fitted and working in rooms with a fuel-burning appliance. Date tested:			
Fuel-burning appliances have been serviced within the last year by a registered engineer. Date serviced:			
Medicines are safely stored.			
Shampoos and cosmetics are safely stored.			
Household chemicals such as cleaning materials, weed killer, anti-freeze, DIY materials and button batteries are safely stored.			
Alcohol and liquid nicotine (found in e-cigarettes) are safely stored.			
There are no known plants with poisonous leaves or berries.			

DROWNING	Safe	N/A	Unsafe
Ponds, swimming pools and other standing water are safely covered or securely fenced.			
Babies and young children are always supervised in the bath.			

CoramBAAF Home Safety Checklist (for use with Form C, Form F, Form PAR, and Form FR)

CUTTING AND CRUSH INJURIES	Safe	N/A	Unsafe
Low glass is either safety glass (BS 6206), covered with safety film or boarded up.			
Greenhouses are made of safety glass or safely fenced.			
Kitchen knives and razor blades are safely stored.			
Equipment, tools and sharp items used for work, DIY or hobbies are safely stored.			
Ceremonial swords are safely stored.			
Tall furniture and appliances are safe and secure, and fixed to the wall where necessary.			
Consideration has been given to fitting anti-finger trapping devices to prevent a toddler's fingers being trapped in doors (age 0–5).			

OTHER	Safe	N/A	Unsafe
The home is warm, in good decorative order, and furniture is sufficient, suitable and in good repair.			
The home and particularly the kitchen and bathroom are kept clean and hygienic.			
The home is secured from inside to prevent toddlers and small children leaving unnoticed.			
Locks on bathroom doors are suitable and allow access in an emergency.			
Garden gates and fencing are secure to prevent toddlers and small children leaving while unattended.			

CoramBAAF Home Safety Checklist (for use with Form C, Form F, Form PAR, and Form FR)

DVDs and video games are stored so that children cannot access inappropriate material.			
Home insurance is in place in line with local policy, and insurers have been informed if the applicant is fostering.			

VEHICLE SAFETY	Safe	N/A	Unsafe
All vehicles have up to date MOT certificates. Expiry date:			
All vehicles have up to date insurance and insurers are notified of fostering status. Expiry date:			
Driving licences have been seen for all those involved in transporting children.			
Appropriate car seats are correctly fitted and used.			

SPECIFIC CIRCUMSTANCES	
Firearms are stored on the property	YES/NO
The home is also a working farm	YES/NO
Hazardous work equipment/materials are stored on the property	YES/NO
If the answer is yes to any of these questions, please see CoramBAAF Practice Note 61, <i>Home Safety Checks in Fostering and Adoption</i> and provide additional information below.	

CoramBAAF Home Safety Checklist (for use with Form C, Form F, Form PAR, and Form FR)

APPLICANT/CARER DECLARATION

- I/we have read and considered home safety and accident prevention information provided by organisations such as the Child Accident Prevention Trust (CAPT) and others.
- I/we undertake to follow this safety advice and to make our supervising/assessing social worker aware of any known difficulties in doing this.
- I/we understand that we should use this form to review home safety before any placement and make adjustments according to the age and functioning of any child being placed, taking into account any information provided about their known behaviour.

Any comments:

CoramBAAF Home Safety Checklist
(for use with Form C, Form F, Form PAR, and Form FR)



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Signature of applicant/carer 1		Date	
Signature of applicant/carer 2		Date	

SAMPLE

CoramBAAF Home Safety Checklist
 (for use with Form C, Form F, Form PAR, and Form FR)



SOCIAL WORK ASSESSMENT

Subject to any outstanding actions noted below, a satisfactory home safety check has been completed in respect of the following age ranges:

0-2	YES/NO	2-5	YES/NO	5-11	YES/NO	11-18	YES/NO

Additional information

Large empty rectangular box for additional information.

Outstanding action

Large empty rectangular box for outstanding action.

Signature of assessor		Name		Date	
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CoramBAAF Dog Assessment Form

(for use with CoramBAAF Form C, Form F, and Form PAR)

This form is intended for completion by the assessing social worker in partnership with the applicant/s or foster carer/s who will hold much of the information. It does not assume the assessing social worker to have any specialist knowledge of dogs, but they should be familiar with the Good Practice Guide, *Dogs and Pets in Fostering and Adoption* (Adams, 2015) available from www.corambaaf.org.uk/bookshop/book/dog-and-pets-GPG. Completion of this assessment form should indicate whether advice should be sought from someone with an expertise in dog behaviour and psychology. One form should be used for each dog.

BASIC DETAILS

Name of owner/s			
Name of dog			
Sex	Male/Female	Neutered?	Yes/No
Date of birth		Age	
Breed			
Breed information			

PERSONALITY AND HISTORY

Describe the dog's personality and general behaviour
Describe what is known about the dog's history

CoramBAAF Dog Assessment Form
(for use with CoramBAAF Form C, Form F, and Form PAR)

LIVING ARRANGEMENTS, TRAINING AND ROUTINES

Where does the dog live and sleep?
What are the dog's daily routines?
Has the dog been formally or informally trained?
To what extent will the dog follow basic commands?

HEALTH AND HYGIENE

What are the arrangements for feeding the dog?

CoramBAAF Dog Assessment Form
(for use with CoramBAAF Form C, Form F, and Form PAR)

Where does the dog toilet and, if applicable, how is the waste disposed of?	
Does the dog have routine vaccinations and preventative treatment for worms, fleas and lice, etc?	
Is the dog registered with a vet?	Yes/No
Is the dog covered by health insurance or other arrangements?	Yes/No
<i>If the answer is 'no' to either of the above, then provide details below</i>	
Details/any further information in relation to health and hygiene	

SAFETY

How does the dog respond to other dogs?
How does the dog respond to people in public and when they visit the home?
What contact does the dog have with children and how does s/he respond to them?

CoramBAAF Dog Assessment Form
(for use with CoramBAAF Form C, Form F, and Form PAR)

SAFETY CHECKLIST

Has the dog ever bitten anyone?	Yes/No
Has the dog ever snapped or snarled at anyone?	Yes/No
Has the dog ever shown signs of aggression to anyone?	Yes/No
Has the dog ever fought with another dog other than in play?	Yes/No
Does the dog chase and/or kill small animals?	Yes/No
Is the dog scared by crying babies/shouting children?	Yes/No
Does the dog get overly excited when people run around?	Yes/No
<i>If the answer is 'yes' to any of the above, then provide details below and give careful consideration as to whether a specialist dog assessment is required</i>	
Can the owner touch the dog's food bowl when eating?	Yes/No
Can the owner remove toys from the dog if very excited?	Yes/No
Does the dog tolerate being stroked/physically examined?	Yes/No
Can the owner push the dog around in a playful manner?	Yes/No
<i>If the answer is 'no' to any of the above, then provide details below and give careful consideration as to whether a specialist dog assessment is required</i>	
Is a specialist dog assessment necessary because of answers above or for any other reason?	Yes/No
Details/further information	

BREEDING/EMPLOYMENT

If the owners use their home for breeding, grooming or running kennels, then set out the implications of this for fostering or adoption below

CoramBAAF Dog Assessment Form
(for use with CoramBAAF Form C, Form F, and Form PAR)

SOCIAL WORKER OBSERVATIONS

Assessing social worker's observations of the dog during visits to the home, including any comments on behaviour, hygiene or safety

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SOCIAL WORK SUMMARY AND ANALYSIS

Suitability/significance of this dog in relation to fostering or adoption

--

What action, if any, needs to be taken to reduce any foreseeable risks?

--

Name of assessing social worker	
Signature of assessing social worker	
Date	

**CoramBAAF Dog Assessment Form
(for use with CoramBAAF Form C, Form F, and Form PAR)**

APPLICANT/FOSTER CARER DECLARATION

- The information provided above is factually correct and I/we have shared fully and honestly all the relevant information regarding our dog.
- I/We have read and understand the information provided in Chapter 4 of the Good Practice Guide, *Dogs and Pets in Fostering and Adoption* (Adams, 2015).
- I/we undertake to provide any necessary supervision of the dog and child/children to minimise risk of harm to either.

Any comments
<p style="text-align: center; opacity: 0.2; font-size: 48px; transform: rotate(-30deg);">SAMPLE</p>

Signature of applicant/ foster carer 1	
Date	
Signature of applicant/ foster carer 2	
Date	

CoramBAAF Pet Assessment Form

(for use with Form C, Form F and Form PAR)

This form is intended for completion by the assessing social worker in partnership with the applicant/s or foster carer/s who will hold much of the information. It does not assume the assessing social worker has any specialist knowledge of the pets, but they should be familiar with the Good Practice Guide, *Dogs and Pets in Fostering and Adoption* (Adams, 2015) available from www.corambaaf.org.uk/bookshop/book/dog-and-pets-GPG.

BASIC DETAILS

Name of owner/s	
Name of animal/s	
Type of animal/s	

DESCRIPTION

Describe the animal/s, including any relevant information about their personality, history and how they were acquired

HOUSING AND ROUTINES

Describe where the animal/s live within the home, including routines such as feeding and grooming

CoramBAAF Pet Assessment Form
(for use with Form C, Form F and Form PAR)

HEALTH AND HYGIENE

Describe any issues in relation to health and hygiene, and how they will be managed	
Does the animal/s have routine vaccinations and preventative treatment?	
Is the animal/s registered with a vet?	Yes/No
<i>If the answer is 'no' to either of the above, then provide details below</i>	
Details/any further information in relation to health and hygiene	

SAFETY

Describe any safety issues and how they will be managed

BREEDING/EMPLOYMENT

If the owners use their home for breeding, grooming or boarding, then set out the implications of this for fostering or adoption below

CoramBAAF Pet Assessment Form
(for use with Form C, Form F and Form PAR)



SOCIAL WORKER OBSERVATIONS

Assessing social worker's observations of the animal/s during visits to the home, including any comments on behaviour, hygiene or safety

SOCIAL WORK SUMMARY AND ANALYSIS

Suitability/significance of the animal/s in relation to fostering or adoption
What action, if any, needs to be taken to reduce any foreseeable risks?

Name of assessing social worker	
Signature of assessing social worker	
Date	

CoramBAAF Pet Assessment Form
(for use with Form C, Form F and Form PAR)

APPLICANT/FOSTER CARER DECLARATION

- The information provided above is factually correct and I/we have shared fully and honestly all the relevant information regarding our pet/s.
- I/we undertake to provide any necessary activity to minimise the risk of harm to the child or children and pet/s.

Any comments
SAMPLE

Signature of applicant/ foster carer 1	
Date	
Signature of applicant/ foster carer 2	
Date	

CoramBAAF Financial Statement and Checklist (for use with Form C, Form F, and Form PAR)

FINANCIAL STATEMENT

Name of Applicant 1	
Name of Applicant 2	

Monthly household income	
Monthly expenditure	
Monthly surplus	

Comments:

Applicant 1	
Signature	
Date	

Applicant 2	
Signature	
Date	

CoramBAAF Financial Statement and Checklist (for use with Form C, Form F, and Form PAR)

FINANCIAL CHECKLIST

MONTHLY INCOME

Income	Applicant 1	Applicant 2
Salary/wages		
Benefits		
Other income (give details below)		
Individual totals		
Total household income		

MONTHLY EXPENDITURE

Mortgage, rent, council tax and utilities	Applicant 1	Applicant 2
Mortgage/rent		
Council tax		
Water charges		
Electricity		
Gas		
Solid fuel/other heating sources		
House insurance (building and contents)		
Telephone (landline) and broadband		
Television licence		
Television packages		
Individual totals		
Total household – total mortgage, rent, council tax and utilities		

CoramBAAF Financial Statement and Checklist (for use with Form C, Form F, and Form PAR)

Regular personal payments	Applicant 1	Applicant 2
Pension payments		
Maintenance/child support		
Hire purchase or loans		
Credit cards/store cards		
Life insurance/illness protection		
Medical insurance		
Debts/arrears/fines		
Mobile telephone		
Club subscriptions		
Charitable payments		
Individual totals		
Total household – regular personal payments		

Vehicles and transport	Vehicle 1	Vehicle 2
Fuel costs		
Service and repairs		
Insurance		
Road tax		
Recovery service		
Public transport		

CoramBAAF Financial Statement and Checklist (for use with Form C, Form F, and Form PAR)

Individual totals		
Total household – vehicles		

Other household and personal costs	Applicant 1	Applicant 2
Food and groceries		
Alcohol		
Smoking		
Clothing		
Home maintenance and repair		
Pets (food, insurance, vet costs)		
Dental costs		
Leisure		
Holidays		
Individual totals		
Total household – other household and personal costs		

Children		
Dinner money		
School trips		
Clothes		
Leisure		
Festivals and birthdays		

CoramBAAF Financial Statement and Checklist (for use with Form C, Form F, and Form PAR)

Other (specify)		
Total household – children		

TOTAL MONTHLY HOUSEHOLD EXPENDITURE

<i>Consisting of:</i>	
Mortgage/rent, council tax and utilities	
Regular personal payments	
Vehicles and transport	
Other household and personal costs	
Children	
Total monthly household expenditure	

CALCULATION

Total monthly income	
Total monthly expenditure	
Monthly surplus	

Notes/comments:

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CoramBAAF Former Partner Reference
(for use with Form C, Form F, and Form PAR)

NAME OF APPLICANT

--

PERSON COMPLETING THE REFERENCE

Name

--	--

Email (optional)

--	--

Telephone (optional)

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Which of the following best represents your view? Please tick one box.

- I have no concerns about the named person fostering or adopting children.
- I do not think the named person is suitable to foster or adopt children, and I have provided written reasons for this below.
- I have concerns about whether the named person is suitable to foster or adopt children, and I would like to discuss this with you.
- Other.

**CoramBAAF Former Partner Reference
(for use with Form C, Form F, and Form PAR)**

Please provide any information that you think is relevant (using additional pages as necessary).

Large empty box for providing relevant information. A large, light grey watermark reading "SAMPLE" is diagonally across the page.

Please tick one of the following boxes to indicate your consent to sharing the information you have provided:

- I am happy for my reference to be shared with the named person.
- I wish for my reference to remain confidential.
- There are parts of my reference that I want to remain confidential and would like to discuss this with you.

Signature	
Date	

**CoramBAAF Employer/Voluntary Activity Reference
(for use with Form C, Form F, and Form PAR)**

NAME OF APPLICANT

--

PERSON COMPLETING THE REFERENCE

Name

Job title

Organisation

Email

Telephone

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

--

What is/was the applicant's position within your organisation? Please give a brief description of their job/role.

--

When did this employment/position start (and finish if they are no longer employed by you)?

--

**CoramBAAF Employer/Voluntary Activity Reference
(for use with Form C, Form F, and Form PAR)**

Please comment on the applicant's health/sickness record

--

Is there a warning or any other disciplinary action on file or pending? If so, please provide details

--

Please comment on the applicant's ability to work with others as part of a team

--

Please comment on the applicant's honesty, trustworthiness, and ability to keep sensitive information confidential

--

**CoramBAAF Employer/Voluntary Activity Reference
(for use with Form C, Form F, and Form PAR)**

Please comment on how the applicant has coped with stressful situations

Empty response box for comments on how the applicant has coped with stressful situations.

Please give details of any incidents or events involving the applicant that have caused you concern

Empty response box for details of incidents or events involving the applicant that have caused concern.

Do you have any reason to believe the applicant may do anything to harm a child?

Empty response box for reasons to believe the applicant may harm a child.

If you had/have a child, would you be happy to leave him or her in the applicant's care?

Empty response box for whether the respondent would be happy to leave a child in the applicant's care.

**CoramBAAF Employer/Voluntary Activity Reference
(for use with Form C, Form F, and Form PAR)**

Please describe any personal qualities of the applicant which are relevant to fostering or adopting children

SAMPLE

If appropriate, please comment on the applicant's knowledge of children. Do they communicate with children appropriate to their age and understanding?

SAMPLE

**CoramBAAF Employer/Voluntary Activity Reference
(for use with Form C, Form F, and Form PAR)**

If appropriate, please describe whether the applicant has the ability to work closely with children's families (and others who are important to the child)

Empty response box for describing the applicant's ability to work closely with children's families.

If appropriate, please describe any experience the applicant has had of setting appropriate boundaries and managing children's behaviour

Empty response box for describing the applicant's experience with setting boundaries and managing behaviour.

Please provide any other information that you think is relevant (using additional sheets if necessary)

Empty response box for providing any other relevant information.

**CoramBAAF Employer/Voluntary Activity Reference
(for use with Form C, Form F, and Form PAR)**

Please tick one of the following boxes to indicate your consent to sharing the information you have provided:

- I am happy for my reference to be shared with the applicant.
- I wish for my reference to remain confidential.
- There are parts of my reference that I want to remain confidential and would like to discuss this with you.

Signature	
Date	

SAMPLE

**CoramBAAF School and Nursery Reference
(for use with Form C, Form F, and Form PAR)**

NAME OF APPLICANT/S	

NAME OF CHILD/CHILDREN	

PERSON COMPLETING THE REFERENCE	
Name	
School or nursery	
Position	
Email	
Telephone	

Please comment on the child/ren's attendance and their physical presentation in school or nursery	

**CoramBAAF School and Nursery Reference
(for use with Form C, Form F, and Form PAR)**

Please comment on the child/ren's emotional presentation in school or nursery

Empty response box for emotional presentation comment.

How well does the applicant work well with the school or nursery to support their child/ren's education/ learning? Please provide details

Empty response box for school/nursery support details.

Have you ever had any concerns regarding the safety or well-being of children in this family? If so what was the nature of this concern?

Empty response box for safety/well-being concerns.

CoramBAAF School and Nursery Reference (for use with Form C, Form F, and Form PAR)

Please provide any other information that you think is relevant (using additional sheets if necessary)

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Please tick one of the following boxes to indicate your consent to sharing the information you have provided:

- I am happy for my reference to be shared with the applicant.
- I wish for my reference to remain confidential.
- There are parts of my reference that I want to remain confidential and would like to discuss this with you.

Signature	
Date	