Glen Mar Church
Child and Youth Worker Reference

Please mail completed form to:

Ministry Administrative Assistant
GLEN MAR CHURCH
4701 New Cut Road
Ellicott City, MD 21043

Send questions to:

SafeSanctuaries@glenmarumc.org

THANK YOU!

_____ has volunteered to work with children, youth and vulnerable adults at Glen Mar Church. Please provide your comments below to help us ensure a safe and secure environment for our children, youth and vulnerable adults.

1. How long have you known the applicant?
   ☐ Less than 1 year ☐ 1-5 years ☐ More than 5 years

2. How well do you know the applicant?
   ☐ Know very well ☐ Know somewhat well ☐ Know only casually

3. How would you describe the applicant's ability to relate to children, youth and/or vulnerable adults?
   ☐ Applicant relates well ☐ Applicant relates poorly ☐ I don't know

4. How would you feel about having the applicant work with your child, youth and/or vulnerable adult?
   ☐ I would feel comfortable ☐ I would not feel comfortable

5. Do you know of any characteristics that would negatively affect the applicant's ability to work with children, youth and/or vulnerable adults?
   ☐ NO ☐ YES, please describe

6. Are you aware of the applicant ever having been convicted of sexual misconduct involving a child, youth or adult?
   ☐ NO ☐ YES, please describe

7. Please list any other comments that you have (continue on the back if needed):

Your signature _____ Date _____

Your name *(Please Print)* _____

Your email _____

Your address _____

Please print and sign, then mail to address above. If you are able to scan to PDF, you may email your signed copy to SafeSanctuaries@glenmarumc.org

Revised (10/2/2020)