CERTIFICATION OF RESIDENTIAL CARE PROGRAM ADMINISTRATOR PROFESSIONAL REFERENCE

Applicant Name:

This is a professional reference verifying the applicant's management/supervision of child care personnel in a 24-hour child care facility. Supervision is defined as having the following responsibilities: hiring, assigning duties, disciplining and rewarding staff, approving leave requests, and formally evaluating staff. Yes I No I

TO BE COMPLETED BY PERSON PROVIDING REFERENCE:

Please type or print clearly

Name of Person Completing Reference:	Job Title:
Name of Ferson Completing Reference.	Sob Title.
Address:	Telephone:
Organization Name:	Organization Type:
-	
Dates of Applicant's Employment:	Applicant's Title:
Dates of Applicant's Employment.	Applicant's file.

Applicant's program management responsibilities and number of child care staff or child-placing staff supervised:

Please list the applicant's strengths, qualities, or abilities relevant to acting as a certified child care program administrator:

Please list the applicant's areas of weakness relevant to acting as a certified child care program administrator:

Any other comments about the applicant relevant to his/her competency as a certified child care program administrator:

I certify that I have been personally acquainted with the applicant since ______ in the capacity of:

supervisor,
board member,
supervisee, or
colleague.

I believe him/her to be competent to act as a certified child care program administrator.

I recommend the applicant for certification.

<u>Respondent's Affidavit:</u> I do solemnly declare and affirm, under the penalties of perjury, that the answers to the above questions are true and correct.

Signature:

Date:

All references must be submitted to the Board in sealed envelopes signed by the writer on the back of the envelope, over the envelope flap.

Yes 🗖

Yes 🗖

No 🗖

No 🗖