Quality Time Child Care and Preschool

Applicant's Name:Reference Person's Name:	
Address:	Title:
In what capacity have you known the application.	cant? For how long?
2. Do you think the applicant is qualified to w	ork in a facility with children? Why/Why not?
3. In terms of employment, what would you sa	ay are his/her greatest strengths and qualifications?
4. In your opinion, is the applicant professiona Explain.	d, reliable and does he/she have good communication skills
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erence Person's Signature:	Date: