



## Early Childhood Care and Education Program Reference Form

This form is to be completed by the applicant's referee.

CONFIDENTIAL REPORT ON APPLICANT FOR  
ADMISSION TO ECE PROGRAM

**Return to:** Admissions Office  
Coast Mountain College  
5331 McConnell Ave  
Terrace BC V8G 4X2  
Tel: 250-635-6511  
Fax: 250-638-5432

\_\_\_\_\_ (name of applicant)

Has applied for admission to the Early Childhood Education Program and has selected you as a referee. Please complete to the best of your knowledge.

**Note:** Under the 1993 Freedom of Information and Protection of Privacy Act applicants may request a copy of this report.

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

**Number of hours of volunteer or work experience**(if applicable) \_\_\_\_\_

Part 1: To what extent has the applicant demonstrated the following:  
(Please check accordingly)

	Superior	Good	Average	Fair	Cannot Judge
Intellectual ability					
Creative and Independent Thought					
Sensitive to Social Problems					
Integrity					
Maturity					
Verbal Communication					
Written Communication					
Capacity for Personal Change					
Ability to Relate to Others					
Ability to Perceive and Solve Problems					

If you have taught this person in an Academic course, where would you rate the applicant in relation to Academic Performance? (Top 5%, 10%, 25%, 50%, etc) \_\_\_\_\_

**Part 2:** Where possible, please comment on your perception of the applicant in the following areas:

1. Motivation and desire to enter the indicated program

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2. Ability to deal with stressful situations

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3. Strengths and limitations

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Additional comments about the applicant's suitability to work in the Early Childhood Education Program

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Name of Referee: \_\_\_\_\_  
(Please Print) (Signature)

Position in Agency/Organization \_\_\_\_\_

Agency/Organization \_\_\_\_\_

Address \_\_\_\_\_

Daytime phone number \_\_\_\_\_

**Thank you for your thoughtful attention to this recommendation.**