JCR CULTURAL **EXCHANGE PROGRAMS** (PTY) LTD

Please return your form to JCR Cultural Exchange Programs (Pty) Ltd, Postnet#88, Private Bag X033, Rivonia, 2128. Fax 0880114641269. Tel 0114642975 www.jcr.co.za



CHILDCARE REFERENCE FORM

- 1. All references must be translated into English on this form with the original attached.
- We encourage you to provide as many additional references as possible. (photocopy this form) 2.
- 3. Please ask each employer to fill in a separate form.
- Please type or write clearly on this form using black ink. 4.

Name of Applicant				
How long have you known the	he Applicant?			
In what capacity do you kno	w the Applicant? (friend, neigh	bor, ?)		
Are you related to the Applic Please note: people related to you form!)	cant? (parent, brother, sister,?) nay not provide a mandatory refer	rence but CAN provide an additiona	I reference for you! Copy this	
How long have you employed	ed the Applicant as a childca	re giver? (please list below)		
Approximate Dates of Care	Names / Ages of Children when the supervision began	Outline Responsibilities e.g. bathing, playing, change diapers, help with homework, other activities	Amount of Care Provided Please approximate the number of hours of care you provided	
	1			
	2			
	3			
	4			
	5			
	6			
	7			
experience with children under Describe the Applicant's per	-	e number of hours the Applicant	cared for all your children).	
Would you recommend this	Applicant for placement as a	an Au Pair? (Please be specific)		
Any additional comments? _				
Name of Person completing this form:(Please print)		Telephone		
City		Postal code		
Country		Best time to call		
Signature		Date		

A4 - Childcare Reference #1jcr 28-10-03

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AU PAIR CHARACTER REFERENCE

- 1. All references must be translated into English on this form with the original attached.
- We encourage you to provide as many additional references as possible. (photocopy this form) 2.
- 3. Please ask each employer to fill in a separate form.
- Please type or write clearly on this form using black ink. 4.

Name of Applicant				
Relationship to Applicant				
How long have you known the App	licant?			· · · · · · · · · · · · · · · · · · ·
Please indicate the Applicant's abili	ty in the following a	reas:		
Communication skills	f Excellent	∫ Good	∫ Fair	1 Poor
Reliability	¹ Excellent	∫ Good	∫ Fair	1 Poor
Work quality	¹ Excellent	í Good	∫ Fair	∫ Poor
Maturity	¹ Excellent	í Good	∫ Fair	∫ Poor
Friendliness	¹ Excellent	í Good	∫ Fair	∫ Poor
Manners	¹ Excellent	∫ Good	∫ Fair	1 Poor
Attitude	¹ Excellent	∫ Good	∫ Fair	1 Poor
Grooming	¹ Excellent	∫ Good	∫ Fair	1 Poor
Ability to handle stress	¹ Excellent	∫ Good	∫ Fair	1 Poor
Ability to handle emergencies	¹ Excellent	∫ Good	∫ Fair	1 Poor
Ability to work with others	f Excellent	∫ Good	∫ Fair	∫ Poor
Please list any strengths and/or we	aknesses of the App	olicant		
Please describe the Applicant's per	rsonality			
Name of person completing the form	(Please print)			
City/State/Country				
Postal code		Relationship to Applicant		
Telephone		Best time to call		
Signature		Date		

A4 - Au Pair Character Referencejcr 28-10-03