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|  | Date: | 16 December 2022 |
| Your Reference: | [Surname] Fostering Assessment |
| Our Reference: | [Mosaic ID Number] |
| Enquiries to: | [Assessing Social Worker] |
| Section: | Fostering Service |
| Tel: | [Social Worker’s Tel] |
| Email: | [Social Worker’s Email] |

Recipient address line 1

Recipient address line 2

Recipient address line 3

Recipient address line 4

Dear [INSERT NAME],

**Re: [APPLICANTS NAME]**

The above person has made an application to become a foster carer for South Gloucestershire Council and has given me written permission to contact you in regard to this. A record of their consent is attached.

Before people are approved as foster carers, we are required to undertake a number of checks and references, and one of these is with their employer or organisation where they volunteer. This reference will contribute to a wider assessment regarding the suitability of the applicant to be a foster carer.

**EMAIL OPTION**

I would therefore be very grateful if you could complete the enclosed form and email it back to me using the email address below. You may not be able to answer all of the questions and if that is the case, please enter “N/A” or “unable to comment” in that box.

If you do not wish to complete a reference, I would be very grateful if you inform me of that decision by emailing: [fosteringbusinesssupport@southglos.gov.uk](mailto:ics-cahbusinesssupportbmr@southglos.gov.uk)

**POSTAL OPTION**

I would therefore be very grateful if you could complete the enclosed form and return it in the enclosed pre-paid envelope. You may not be able to answer all of the questions and if that is the case, please enter “N/A” or “unable to comment” in that box.

If you do not wish to complete a reference, I would be very grateful if you inform me of that decision by emailing: [fosteringbusinesssupport@southglos.gov.uk](mailto:ics-cahbusinesssupportbmr@southglos.gov.uk)

Please remember to tick one of the boxes at the end of the form to show your agreement or otherwise for us to share your reference with the applicant. If you ask for your reference or parts of your reference to remain confidential, we will respect this.

If you would like to discuss any aspect of the applicant’s suitability to become a foster carer, or have any questions about this letter, please do not hesitate to contact me.

Thank you in anticipation of your help with this matter.

Yours sincerely,

p.p. [Business Support Worker]

**[Name of Assessing Social Worker]**

Fostering Service

South Gloucestershire Council

**Voluntary Activity Reference**

| **NAME OF APPLICANT** |
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| **PERSON COMPLETING THE REFERENCE** | |
| **Name** |  |
| **Job title** |  |
| **Organisation** |  |
| **Email** |  |
| **Telephone** |  |

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| **How long have you known the applicant, and in what capacity?** |
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| **What is/was the applicant’s position within your organisation? Please give a brief description of their job/role.** |
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| **When did this position start (and finish if they are no longer volunteer for you)?** |
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| **Please comment on the applicant’s health/sickness record** |
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| **Is there a warning or any other disciplinary action on file or pending? If so, please provide details** |
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| **Please comment on the applicant’s ability to work with others as part of a team** |
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| **Please comment on the applicant’s honesty, trustworthiness, and ability to keep sensitive information confidential** |
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| **Please comment on how the applicant has coped with stressful situations** |
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| **Please give details of any incidents or events involving the applicant that have caused you concern** |
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| **Do you have any reason to believe the applicant may do anything to harm a child?** |
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| **If you had/have a child, would you be happy to leave him or her in the applicant’s care?** |
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| **Please describe any personal qualities of the applicant which are relevant to fostering** |
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| **If appropriate, please comment on the applicant’s knowledge of children. Do they communicate with children appropriate to their age and understanding?** |
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| **If appropriate, please describe whether the applicant has the ability to work closely with children’s families (and others who are important to the child)** |
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| **If appropriate, please describe any experience the applicant has had of setting appropriate boundaries and managing children’s behaviour** |
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| **Please provide any other information that you think is relevant (using additional sheets if necessary)** |
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| **Please tick one of the following boxes to indicate your consent to sharing the information you have provided:** |
| --- |
| * I am happy for my reference to be shared with the applicant. * I wish for my reference to remain confidential. * There are parts of my reference that I want to remain confidential and would like to discuss this with you. |

|  |  |
| --- | --- |
| **Signature** |  |
| **Date** |  |

|  |  |
| --- | --- |
| **PLEASE RETURN THIS REFERENCE TO:** | |
| **Name** | ICS CAH Business Support BMR |
| **Fostering Service** | South Gloucestershire Council |
| **Email** | Email: [fosteringbusinesssupport@southglos.gov.uk](mailto:ics-cahbusinesssupportbmr@southglos.gov.uk) |
| **Postal Address** | Department for People  Business Support Central  PO Box 1955  Bristol  BS37 0DE |