Ohio Department of Job and Family Services

CHILD CARE EMPLOYEE REFERENCE FOR CHILD CARE CENTER AND TYPE A HOMES

To Be Completed by the Employer				
			Position Applied For	
Employer Signature				
Print Employer Name				
Name of Center				
Street Address				
City	Ctoto	7in Codo		Talanhana Numbar
City	State	Zip Code		Telephone Number
T D O 1 (1D D D)	·			
To Be Completed By Person Providing Reference				
Applicants for employment in a child care center or Type A Home must provide their employer with three references which				
attest to the applicants suitability for employment in a center or Type A Home. These references must be on file before the first day of employment (Rule 5101: 2-12-25 and 5101: 2-13-25 of the OAC). The person applying for the position above				
has given us your name as a reference on their application for employment with our facility. Please complete and return				
this form to me at my address above as soon as possible. All information received will be kept confidential. Please note,				
references must be from persons not related to the employee.				
1. How long have you known the applicant?				
2. What is the nature of your association with the applicant? (friend, employee, neighbor, etc?)				
(Polotive references connet be accepted)				
(Relative references cannot be accepted.) 3. In your opinion, is this person suitable for work in a child care facility or type A home?				
Yes No				
4. To the best of your knowledge, has the applicant ever been dismissed or asked to resign from a position because of				
inability to carry out work responsibilities in a child care center?				
5. To the best of your knowledge, has this person ever been convicted of or pleaded guilty to child abuse or any crimes of				
violence or had a child removed from their home as described in Section 2151.353 of the Ohio Revised Code?				
L Yes L No 6. Additional comments				
D: (A)				
Print Name				
Otes et Addresse				
Street Address				
City.	Ctata	7:- Cada	Talanhan	a Niversia au
City	State	Zip Code	l elepnor	ne Number
				I.a.
Signature of Person Providing Reference				Date
For Deferences Completed Dy Telephone				
For References Completed By Telephone				
Who completed the form?				
				l D
Signature				Date

This is a sample form provided by ODJFS which may be used by centers and type A homes to meet the requirements of the rules listed above.