AIDANFIELD CHRISTIAN SCHOOL BOARD OF TRUSTEES

REFEREES REPORT FOR TEACHING POSITIONS

GENERAL and SPECIAL CHARACTER

As a nominated referee you are invited to complete the report on the candidate who has supplied the information in the box.

YOUR REPORT IS CONFIDENTIAL TO THE AIDANFIELD CHRISTIAN SCHOOL BOARD OF TRUSTEES AND TO THOSE INVOLVED IN THE SELECTION PROCEDURES.

While it is not necessary to complete every item, you will appreciate that as full a report as possible is likely to be of most use to the School Board. Notes for your guidance are to be found overleaf.

Please answer EITHER Section A OR Section B and return this form directly to THE PRINCIPAL, marked `confidential' in the stamped addressed envelope provided by the applicant or scanned to [mark.richardson@aidanfield.school.nz](mailto:mark.richardson@aidanfield.school.nz) . Thank you for your assistance.

Please note; we may follow up this reference with a phone call.

What is the best phone number to contact you on: Daytime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# ALL DETAILS SHOULD BE COMPLETED BY THE APPLICANT

Referee's report on .......................................................................................................... *(applicant)*

for the position of **teacher**

at AIDANFIELD CHRISTIAN SCHOOL, 2 Nash Road, Aidanfield, Christchurch

REPORT MUST BE RECEIVED AT AIDANFIELD CHRISTIAN SCHOOL - **BY 4.00pm Wednesday 1March, 2023**

**NAME OF REFEREE** ........................................................................................................................................

**ADDRESS:** .........................................................................................................................................................

**PHONE:**  ........................................................................................(day) ........................................................................................(evening)

**OCCUPATION OF REFEREE**

**AND POSITION HELD:** ...............................................................................................................................

**Note to Applicants:** *Please forward a copy of this referee's form to each of your nominated referees.*  *Please include a stamped addressed envelope for your referee's use in its return to the Board.*

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**SECTION A:**

If for some reason you find it impossible to act as a referee you are free to complete only the statement below:

I  do not wish to submit a referee's report on behalf of ............................................................................ am unable

Signed:............................................................................................... Date:.........................................................

Reason (optional):

**SECTION B:**

How long have you known the applicant, how well?

In what capacity have you known/worked with/supervised this person?

|  |  |  |
| --- | --- | --- |
|  | What opportunity have you had to observe the applicant's professional work? | |
|  | **TEACHING PRACTICE** | **Please place a tick to indicate ability on scale** |
|  |  | **Low Satisfactory High** |
|  | Ability to engage pupils who are 11 to 15 years old |  |
|  | Ability as a teacher of PE |  |
|  | Ability as a teacher of Health |  |
|  | Expectations and maintenance of high standards |  |
|  | Classroom/learning Environment (relevant displays, tidiness, vibrancy) |  |
|  | Creativity of activities students involved in |  |
|  | Relationship with pupils |  |
|  | Behaviour Management |  |
|  | Ability to use ICT to enhance learning |  |
|  | Overall ICT capability |  |
|  | Willingness to keep up to date |  |
|  | Ability to work as a team player |  |
|  | Ability to communicate effectively |  |
|  | Relationship with staff members |  |
|  | Participates in staff social activities |  |
|  | Sense of professionalism and ethics |  |
|  | Maintains performance under pressure |  |
|  | Ability to follow through with required tasks |  |
|  | Perception by parents or caregivers of teaching ability |  |
|  | Relationship with parents or caregivers |  |
|  | Willingness to work hard |  |
|  | Punctuality |  |
|  | Health and Attendance |  |
|  | What area(s) are their real strengths? | |
|  | What is (are) the best class level(s) for them? | |
|  | Areas for development: | |

Please add comment as you are able (feel free to add pages if needed)

**PERSONAL QUALITIES** (for instance; appearance, reliability, determination, sensitivity, co-operation, relationships with others, fairness and sense of humour, enthusiasm)

**PLANNING PREPARATION OF LESSONS/ORGANISING ABILITY**

**What opportunity have you had to observe the applicant's expression of Christian faith and service?** (We acknowledge that overt expression of faith is not possible in many environments. However, sometimes a person’s faith is evident through the way they conduct themselves and the way they live their lives no matter where they are).

Please comment on the following as you are able -

**CHRISTIAN COMMITMENT AND MODELLING A CHRISTIAN LIFE**

**INVOLVEMENT IN CHRISTIAN/CHURCH AND CHRISTIAN YOUTH WORK**

Are you aware of any issues in the applicant’s personal life that would appear to be in conflict with what could be expected from a person claiming to be a Christian? If yes, please elaborate.

Would you please comment on the applicant's **potential** and assess his/her ability to cope with the professional responsibilities of the position applied for. Please emphasize **both** strengths and weaknesses.

**Do you recommend the applicant? (please circle)**

Without reservation / With reservation / I do not recommend the applicant

Thank you for your help. The Board view this appointment as an important one for the school.