KINGSTON UPON HULL CITY COUNCIL CHILDREN AND FAMILY SERVICES

PLACEMENT WITH PARENTS ETC. REGULATIONS 1991

References for: Date:

Name:

Address:

1. Are you a relative?
2. How long have you known the applicant/s?
3. In what capacity?
4. Can you comment upon the stability and happiness of their family?
5. Is your knowledge based on your own observations or on here say?
6. What is their usual state of health, both mental and physical?
7. From your knowledge of them and their family, what do you think qualifies them as suitable person/s to care for this child and to work with the Department in the child best interests?
8. Most people have weak spots – what do you think they would find difficult to cope with?
9. Will you be providing support to the applicant/caring for the child in question?
10. Would you feel confident to leave a child of your own in their care if the need arose?
11. Do you know of any reasons why it would be unwise to place a child with them? (for example, behaviour, attitudes, social problems).
12. Please add any information or comments you consider may be helpful.

Signature ………………………………………………………………………………….. Date: ……………………………………….

Please return to: