**Demi Pair Character Reference Form**

This individual is applying to become a Demi Pair in Australia. The applicant will attend daily English classes at whilst living with a local host family and will provide childcare and household assistance to the family. Please answer the questions truthfully and provide as much detail as possible.

|  |  |  |
| --- | --- | --- |
| **NAME OF APPLICANT**   |   |  |
|  |
| **HOW LONG HAVE YOU KNOWN THE** **APPLICANT?**   |   |  |
|  |
| **IN WHAT CAPACITY DO YOU KNOW THE APPLICANT?**   | **EMPLO** **YER OR COLLE** **AGUE**   |  | **EDUCATION**  **(e.g. teacher)**   | **FRIEND**   | **OTHER (PLEASE SPECIFY)**   |
|  |
|   |  |   |   |   |
|  |
| **HOW OFTEN DO YOU SEE THE APPLICANT?**   |  **DAILY**   |  | **WEEKLY**   | **MONTHLY**   | **YEARLY**   |
|  |  |  |  |
|   |  |   |   |   |
|  |
| **PLEASE DETAIL THE**  **APPLICANT’S**  **STRENGTHS**   |     |  |
| **PLEASE DETAIL THE**  **APPLICANT’S**  **WEAKNESSES**   |     |  |
|  |
| **IS THE APPLICANT EMPLOYED?**   | **YES**   |   | *If yes, what position does the applicant hold and what are the key duties of their role?*    |
|  |
| **NO**   |   |
|  |
| **UNSURE**   |   |
|  |
|  **DO YOU THINK THE APPLICANT WILL ADAPT WELL TO LIVING IN AUSTRALIA WITH A HOST FAMILY?**  Please explain   |
|           |

|  |
| --- |
| **DO YOU THINK THE APPLICANT WILL ADAPT WELL TO NEW SITUATIONS, STRESS AND CULTURAL DIFFERENCES?** Please explain  |
|         |
| **DO YOU HAVE ANY OTHER COMMENTS TO SUPPORT THE APPLICANT?** Please explain  |
|         |

|  |  |  |  |
| --- | --- | --- | --- |
| **PLEASE RATE THE APPLICANT’S SKILLS** *(tick the relevant box)*  |   |   |   |
|   | **EXCELLENT**   | **GOOD**   | **OK**   | **UNKNOWN**   |
| **ABLITY TO FOLLOW INSTRUCTIONS**   |   |   |   |   |
| **ABLITY TO MEET A DEADLINE**   |   |   |   |   |
| **ABLITY TO WORK UNDER PRESSURE**   |   |   |   |   |
| **ABLITY TO MULTI-TASK**   |   |   |   |   |
| **ABILITY TO WORK IN A TEAM**   |   |   |   |   |
| **ABILITY TO WORK AUTONOMOUSLY**   |   |   |   |   |
| **RESPONSIBILITY**   |   |   |   |   |
| **USE OF INITATIVE**   |   |   |   |   |
| **ADAPTABILITY**   |   |   |   |   |
| **PUNCTUALITY**   |   |   |   |   |

|  |  |  |  |
| --- | --- | --- | --- |
| **REFEREE FULL NAME**   |    | **SIGNATURE**  |   |
| **CONTACT NUMBER**   |    | **EMAIL**   |   |
| **REFEREE ADDRESS**   |    | **DATE**   |   |