aCCOMPANYING

rEFERENCE FORM 2023-2024 A.3

For those wishing to accompany   
explorers and candidates

The role of accompanist is a crucial one in the journey for people who wish to explore and discern God’s calling. Thank you for agreeing to write this reference for a person who in interested in becoming an accompanist. It is important that your reference gives an independent and objective view and therefore referees should not be related to the applicant. You need to have known the applicant for at least three years.

Please refer to the document A.4 which sets out the gifts and graces needed in an accompanist. This reference form is structured according to those gifts and graces.

Please type the report in not less than 11-point font using no more than two A4 pages (excluding the first information box). Please sign and date the report.

Please show your reference to the applicant and ensure they have signed it before you return it to [explore@methodistchurch.org.uk](mailto:explore@methodistchurch.org.uk)

Your personal details

|  |  |
| --- | --- |
| Title |  |
| Surname |  |
| First name |  |
| Your full postal address |  |
| Your telephone number (landline) |  |
| Your telephone number (mobile) |  |
| Are you ordained?  If so, please specify your order of ministry |  |

The applicant

|  |  |
| --- | --- |
| Their title |  |
| Their surname |  |
| Their first name |  |
| How do you know the applicant? |  |
| How long have you known the applicant? |  |

Please comment on the applicant’s suitability   
to be an accompanist under these headings

|  |
| --- |
| Vocation (Call and Commitment) |
|  |
| Vocation (Ministry in the Methodist Church in Britain) |
|  |
| Relationship with God |
|  |
| Personality and Character |
|  |
| Being in Relationship with others |
|  |
| The Church’s ministry in God’s world |
|  |
| Leadership and Collaboration |
|  |
| Learning and Understanding |
|  |
| Communication |
|  |
| SAFEGUARDING  Are there any safeguarding or other outstanding disciplinary matters relating to this applicant which you are aware of, which would prevent them from acting as an accompanist? |
|  |
| Any other comments you wish to make |
|  |
| Do you in general recommend this applicant to become an accompanist? |
|  |

Declarations

|  |  |  |
| --- | --- | --- |
| Signature of applicant |  | **Date** |
| Signature of referee |  | **Date** |
| When signing please scan in (or add a photograph of) your actual signature. We cannot accept a typed name in place of a signature. | | |
| Privacy Notice  By signing this application form we will be assuming that you agree to the processing of your personal data (as described above), in compliance with General Data Protection Regulation.  If you would like further information, please read our privacy policy: [Privacy and cookie policy (methodist.org.uk)](https://www.methodist.org.uk/privacy-and-cookie-policy/) | | |