



AIR FORCE FAMILY CHILD CARE (FCC) REFERENCE CHECK

In accordance with Air Force Instruction 34-276, *Family Child Care Programs*, paragraph 2.8.4, "Require at least two professional or educational references on each applicant." _____ has applied to become a licensed/affiliated FCC Provider at _____.

Reference Name _____

Name of person conducting reference check _____

How was reference contacted?-- _____ Date _____ Time _____
If contacted by e-mail attach the copy of the e-mail to this form.

Please answer the following questions:

What is your relationship to the applicant?-- _____

How long have you know the applicant? _____

Is there any reason(s) you know of that would inhibit this applicant from providing child care in their home? No Yes, state reason(s) _____

Additional Comments: _____