



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
*CHILDREN'S ADMINISTRATION*

RE: Reference Letter

Dear:

, with the agency, has given your name as a reference. Directors and/or administrators of an agency licensed through the Division of Licensed Resources (DLR) must be a person of good character. They must demonstrate that they have the experience, ability, physical health, emotional stability, and personality to manage a program serving youth.

1. Please tell me how long and in what context you have known this professional?
2. Please offer your evaluation of the above person's ability to practice competently.
3. Please give your impression of this person's adherence to professional social work ethics and standards of conduct in dealing with clients, agency staff, and colleagues.
4. Please provide your assessment of this person's ability to meet client and children's physical, mental, emotional, and social needs.

This can be completed by hand using the back of the form or electronically. If you would like to complete this electronically and you received a paper copy, you can download this form at <https://www.dshs.wa.gov/fsa/forms> and enter 16-211 into the form number search.

Please feel free to email or mail the letter back to the Regional Licensor. A postage paid envelope is enclosed for your convenience. I appreciate your willingness to provide a reference and look forward to receiving this by . If you have any questions, please contact me by phone or email as noted below. Thank you.

Sincerely,

Regional Licensor

Phone:

Email: