



Attachment Parenting International Leader Applicant Information

Recommendation for API Support Group Leader Applicants

Name of person filling out this recommendation: _____

Street Address: _____

City, State, Postal Code, Country: _____

Phone: _____ Email address: _____

Name of Leader Applicant: _____ Date _____

Please attach additional pages as needed to answer the questions.

1. How long have you known this applicant and in what capacity (friend, relative, etc.)?
2. Briefly describe what you know about Attachment Parenting philosophy?
3. Please describe how the applicant relates to his/her child/ren. Share how the applicant exemplifies Attachment Parenting ideals (include examples when you observed the applicant using positive discipline, being responsive, etc.).
4. Describe at least three strengths of the leader applicant that you have observed and believe will help his/her ability to lead discussions, help parents and manage a group.
5. In what ways does the applicant show interest in, concern for, and ability to communicate respectfully with other parents?
6. Do you consider the applicant to be completely trustworthy?
7. Do you have any reason to believe that the applicant would have difficulty being accepting of all parents who may attend API support group meetings?
8. Is there anything else you would like to add?

Thank you for your time in completing this recommendation form.

Please mail, fax, or email this form to Lisa Feiertag, API Leader Applicant Liaison, P.O. Box 274, New Market, MD 21774 USA, or 800-850-8320 or leaderapplicants@attachmentparenting.org.