REFERENCE / VERIFICATION CHECK

Applicant's Name:	
Person Contacted:	Title:
Organization/Employer	Phone:
1. Please verify the dates of his/her employment with your company? How much time did he/she spend	
under your direct supervision?	
If not supervisor, how do you know him/her?	
How long have you known him/her?	
2. Please verify his/her job classification and what were the nature of the duties associated with that position?	
3. What was his/her reason for leaving?	
4. Is he/she eligible for rehire?	
For the following, please state: (Outstanding, Above A	Average, Average, Unsatisfactory)
How would you describe his/her:	
A. Attendance?	
B. Punctuality?	
C. Relationship with co-workers?	
D. Customer Service?	
E. Ability to learn new tasks?	
F. Initiative and follow through?	
G. Quality of work?	
H. Job Performance?	
5. Need for close supervision?	
6. What were his/her principal strengths?	
7. What were his/her principal limitations?	
8. Is there anything else of significance you would	
Checked By:	Date: