

REFERENCE CHECK FORM

Name of Candidate _____ Position to be filled _____ Date Contacted: _____

Name of reference: _____ Title: _____ Phone _____

Supervisory Relationship to Candidate _____ When? _____

How many years of service _____ Did they receive Tenure? ____Yes ____No

Report with staff, parents, students and supervisors? _____

Examples of times when she/he has had to react to criticism? _____

Absenteeism; how many days absent in the past two years? _____

What are areas for growth? _____

Greatest strengths when working for you? _____

Hire Again? _____

Reason for leaving? _____

JOB SPECIFIC QUESTIONS:

Describe position in detail. Will she/he be a good fit? _____

Other job specific questions and follow-up: _____

Person Completing Form: _____