

REFERENCE CHECK

Name of Applicant: _____

Date: _____

Position Applied For: _____

Job Number: _____

Person Contacted: _____

Title: _____

Employer: _____

Telephone No.: (____)_____

1. What were their dates of employment with your company? From: _____ To: _____

2. What position did they hold when starting? _____ When leaving? _____

3. What were some of their duties? _____

4. How would you rate them compared to others in the same job? Poor Adequate
 Good Outstanding

5. What are their strong points? _____

Technical Skills: _____

Quality of Work: _____

Quantity of Work: _____

Attendance: _____ Punctuality: _____

6. Attitude towards job and/or co-workers: _____

7. Any weaknesses that you would care to point out? _____

8. Were they cooperative with other employees? _____

9. Would you rehire them? YES NO If no, why not? _____

10. Are there any other comments you wish to make which would help us in evaluating this applicant?

Checked by Signature

Date