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| --- | --- |
| **TELEPHONE/WRITTEN REFERENCE CHECK** | |
| Applicant’s name: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Reference’s name: |  | Title: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Organization: |  | Telephone: |  |

|  |  |  |
| --- | --- | --- |
| How long have you known this applicant? |  | |
| In what capacity do you know this applicant? Circle one : Supervisor, co-worker, friend, or other | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant was employed at your organization from: |  | to |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Full-time employment dates from: |  | to |  |
| Part-time employment dates from: |  | to |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| What were his/her duties? | |  | | | | | |
|  | | | | | | | |
| Was he/she a supervisor? | Yes | |  | No |  | If yes, number of employees supervised |  |

|  |  |
| --- | --- |
| Describe his/her attitude toward the organization? |  |
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|  |  |
| --- | --- |
| What are his/her strong points? (Give examples) |  |
|  | |
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| --- | --- |
| Weak points? (Give examples) |  |

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| --- | --- |
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|  | |
| Would you consider him/her dependable? |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Why did he/she leave your company? |  | | | | |
|  | | | | | |
| Did he/she give adequate notice? | Yes |  | No |  |  |
|  | | | | | |

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| --- | --- | --- | --- |
| Please rate the applicant using the following scale: | | | |
|  | | | |
| **0 Unable to evaluate** |  | Technical ability |  |
| 1 Below Average |  | Attendance record |  |
| **2 Average** |  | Ability to get along with others |  |
| **3 Good** |  | Cooperation with superiors |  |
| **4 Excellent** |  | Motivation |  |
|  |  | Professional appearance |  |
|  |  | Ability to take instructions |  |
|  |  | Common sense |  |
|  |  | Effective use of time |  |
|  |  | Communication skills (oral and written) |  |
|  |  | Overall quality of work |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Would you re-employ? | Yes |  | No |  | If no, why not? |  |

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| --- | --- | --- | --- | --- | --- |
| Would you recommend him/her for a position as |  | ? Yes |  | No |  |

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| --- | --- |
| Comments: |  |
|  | |

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| --- | --- | --- | --- | --- |
| **Indicate interview method by signing below:** | | |  | |
| **Telephone** reference by: |  | |  | |
| Signature Title Date | | | | |
| Print signature: |  | | | |
|  |  | |  | |
| **Written** reference by: |  | |  | |
| Signature Title Date | | | | |
| Print signature: | |  | | |
|  | |  |  | |
| Reference requested by: | |  |  | |
|  | | Signature Title Date | | |
| Print signature: | |  | | |
|  | |  | |  |
| Please return this form to: | |  | | at |
|  | | Name (type or print) | |  |
| **Fayetteville Technical Community College** P.O. Box 35236 **Fayetteville, NC 28303** | | | | |