



Reference Check Form

Applicant Information

Applicant Name: _____ Position Applied For: _____

Reference Information

Reference Name: _____ Title: _____

Name of Company: _____

Company Phone Number: _____ Relationship to Applicant: _____

Previous Employment

Position Held: _____

Dates of Employment: Start Date _____ End Date _____

Candidate strong points: _____

Candidate weak points/areas for improvement _____

How well did this candidate interact with others: _____

Did this candidate have any performance issues? _____

Applicants Job Responsibilities: _____

A critical responsibility of the job he/she interviewed for is _____.

Do you think the candidate will be successful in this area?

Would you rehire this applicant? YES NO

Additional Comments?

Signature of person checking reference

Date