

Applicants Name: _____

Date: _____

REFERENCE CHECK

REFERENCE NAME: _____

DATE OF BIRTH: _____

CURRENT ADDRESS: _____

OCCUPATION: _____

LAST SAW APPLICANT: _____ YEARS KNOWN: _____

How did you become acquainted with the applicant?

Are you aware of any circumstances which might disqualify the applicant for public service?

To your knowledge, have the police ever been called due to actions of the applicant?

To your knowledge, did or does the applicant use drugs, to include marijuana, prescriptions, or other illegal substances? Alcohol Abuse? Gambling Abuse?

Can you describe a situation where the applicant effectively demonstrated the ability to handle themselves around others during a difficult situation?

Applicants Name: _____

Date: _____

Can you provide an example of when the applicant was honest or reliable?

Can you describe the applicant's daily appearance? Do you know of times when the applicant was late or tardy to an event or work?

Would you rank the Applicant as Highly Qualified, Qualified, or Not Qualified? Why?

HIGHLY QUALIFIED

QUALIFIED

NOT QUALIFIED

Would you recommend the Applicant for the position applied?

YES NO

If possible, please list a person who may be able to assist us further in our consideration of the applicant

Name: _____

Address: _____

Telephone number / Email: _____

Please give any additional information you may think is helpful for our consideration of the applicant:

INFORMATION RECEIVED BY:

PERSONAL INTERVIEW

MAIL

TELEPHONE

INVESTIGATOR: _____

DATE: _____