

RETURN FORM TO: WAKULLA COUNTY SCHOOLS
 HUMAN RESOURCES
 P.O. BOX 100
 CRAWFORDVILLE, FL 32326
 Or FAX TO 850-926-0123

WAKULLA COUNTY SCHOOL BOARD
REFERENCE FORM FOR CLASSIFIED APPLICANTS

INSTRUCTIONS FOR APPLICANT: This form should be filled out by one of your most recent supervisors. However, you may use this form if you have no previous work experience or if your experience is over 10 years old – in this case you should use a reference from an organization or individual where you have performed as a volunteer or unpaid helper/assistant. **Before giving this form to your reference, type or print your name and Employee Identification Number (EIN) or your application's Unique Identification Number in the space provided.** Your signature must be written below for this form to be valid.

APPLICANT NAME: _____	EIN or Unique Id Number: _____
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INSTRUCTIONS FOR REFERENCE: I have applied for a position with the Wakulla County School District and would like for you to complete the form below in order for my application to be considered for interviews and screenings. This document will not be kept confidential. In making this request I am expressly releasing the reference from any liability by complying with my request.

Signature of Applicant: _____ Date: _____

TO BE COMPLETED BY REFERENCE: Your reference will be used to determine the applicant's eligibility for employment. Based on your judgment of the applicant, place a check in the appropriate space below:

	Outstanding	Good	Meets acceptable standards	Below acceptable standards	No basis for judgment
1. Holds self to high standards for quality work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Capable of performing well without the need of direct supervision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Capable of demonstrating resourcefulness and adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Demonstrates an ethical behavior regarding attendance and punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Demonstrates an ability to get along well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Demonstrates ability to communicate effectively, in writing and orally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Is responsible and dependable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Follows instructions well, written or oral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Demonstrates ability to treat tools and equipment with care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Uses and understands computer technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Shows initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Maintains a neat and appropriate appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Indicate your overall recommendation of this applicant for a position working with or around children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What is/was your relationship to the applicant: _____

Comments or any pertinent information: _____

Print Your Name: _____ Signature _____ Date _____

Your Title _____ Business Name _____ Telephone Number: _____