

HERTFORD COUNTY PUBLIC SCHOOLS TELEPHONE REFERENCE FORM

Reference Name:

Phone:

School/County:

Relation to Candidate: Applicant's Name:

Position being considered: 1. Did this applicant work for you? Yes No

2. Dates of Employment:

3. How long did this applicant work with you?

Less than 1 year 1 -3 years 3 or more years

4. Does your company policy allow you to comment on performance? X Yes ☐ No

Please rate the applicant's performance by using the following scale: 1 = Poor 2 = Below Average 3 = Average 4 = Above Average 5 = Superior

Performance/Behavior	Rating	Comments
Professional competencies		
Evidence of professional growth and commitment		
Ability to convey thoughts		
Enthusiasm for work		
Evidence of self-discipline and self-reliance		
Attitude toward peers		
Attitude toward children		
Ability to perform work related duties		

5. Strengths

6. Weaknesses

7. Would you re-hire this applicant? Yes ☐ No, why n/a

8. Reason for separation from your organization ____n/a_____

9. Has this employee ever been placed on a MIP (Mandatory Improvement Plan)? ☐ Yes No If
yes, did they complete it successfully? _____unknown_____

Employee Conducting Reference Check: _____

Principal Signature

School/Department

Date