

# Reference Check Form

## REFERENCE CHECK/VERIFICATION

**NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

	EMPLOYER-1	EMPLOYER-2	EMPLOYER-3
NAME OF EMPLOYER			
NAME OF CONTACT			
PHONE NUMBER			
LAST JOB TITLE			
EMPLOY DATES FROM/TO			
LAST RATE OF PAY			
WOULD YOU REHIRE?			
REASON FOR LEAVING			
QUALITY OF WORK			
QUANTITY OF WORK			
WORK ATTITUDE			
ATTENDANCE RECORD			
ANY OTHER COMMENTS?			

**PERSON MAKING INQUIRY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_