

Professional Reference & Employment Verification Form

Applicant Name: _____ Date: _____

Reference Name: _____ Phone Number: _____

Relationship to Applicant: _____

Position Title: _____

Duration of Employment - From: _____ To: _____

Reason for Leaving: _____

Eligible for Rehire: Yes No

Question 1) What was the working relationship you had with this person? For how long?

Question 2) Please describe his or her interpersonal skills.

Question 3) What are his or her strongest attributes and what can be improved?

Question 4) How would you describe his or her overall work performance?

Question 5) Did he or she work well in stressful situations?

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Question 6) If appropriate, would you recommend this person for rehire?

Question 7) Any additional comments?

Reviewer Name: _____ Date: _____

Please return verification to Human Resources

Office Phone: (909) 537-5138

Email: backgroundcheck@csusb.edu

Website: hrd.csusb.edu