

**FRANKLIN CENTRAL SUPERVISORY UNION**

*Superintendent's Office: 28 Catherine Street ♦ St. Albans ♦ Vermont ♦ 05478 ♦ Telephone: (802) 524-2600  
Schools: St. Albans Town Educational Center ♦ St. Albans City School ♦ Fairfield Center School ♦  
Bellows Free Academy Union District #48 ♦ Northwest Technical Center*

**REFERENCE CHECK FORM**

*Please print in ink*

*Applicant's Name:* \_\_\_\_\_ *Position:* \_\_\_\_\_

*Reference Checked By:* \_\_\_\_\_

*Contact Name:* \_\_\_\_\_ *Title:* \_\_\_\_\_

*Phone Number:* \_\_\_\_\_ *Company:* \_\_\_\_\_

***General Questions***

Verify the applicant's employment dates at your district/company: From \_\_\_\_\_ to \_\_\_\_\_.

Would you re-employ this person?  Yes  No

Was this person prompt in reporting to work?  Yes  No

What was this person's position and duties with your company?

What strengths did this person bring to the position?

What job requirements or expectations did the applicant have difficulty meeting?

How well did this person get along with others? (i.e.: students, staff, supervisor, community members or clients)

Why did (or does) this person want to leave your employ?

What else should we be aware of as we review this applicant for a position here?

***Job Related Questions***

Job Related Technical Skills:

Performance Skills: