



REFERENCE VERIFICATION

APPLICANT: _____
SOC SEC NO: _____

PREVIOUS EMPLOYER: _____
POSITION HELD: _____
ADDRESS: _____
SUPERVISOR: _____
SUPERVISOR'S PHONE NO: _____
DATES EMPLOYED: _____
REASON FOR LEAVING: _____

I hereby authorize the above named organization or person to release any and all information pertaining to my (past) employment, including, but not limited to, the information requested below.

Applicant's Signature _____ Date _____

ADMINISTRATIVE USE BELOW ONLY.

EVALUATION

Table with 5 columns: Job Knowledge, Attitude, Dependability, Punctuality, Personal Appearance, Excellent, Good, Fair, Poor. Each cell contains a horizontal line for evaluation.

Are Dates Correct? _____ Is Position Correct? _____

Eligible for Rehire? _____ If No, Why Not? _____

Reference Given By: _____ Title: _____

DSS Employee Taking Evaluation: _____ Date: _____