

Loving Hearts In Home Care LLC

Employment Reference Verification Form

Name of Candidate _____

Potential Position _____

Current/Previous Employer _____

Type of Business _____

Supervisor/Person Contacted _____

Position or Title of Person Contacted _____

Telephone Number of Person Contacted _____

Date _____

Note: Try to speak with the applicant's supervisor; if this is not possible, be sure the individual you speak with has a factual basis for his/her comments. Ask the person contacted if he/she has a few minutes to speak with you regarding _____ for a reference check.

Name of Candidate _____

1. I'd like to verify the following information from _____'s application:

- (a) Dates of employment: From _____ to _____.
- (b) Part time or Full time: _____.
- (c) Salary: He/she started \$ _____ per _____. Is that correct? Yes or No.
- (d) Did he/she supervise other people? Yes or No _____. How many? _____.
- (e) He/she said they held the following position _____. Is that correct? Yes or No.

2. Why did he/she leave your company?

3. What were his/her strong points? _____

4. What was his/her weak points or limitations? _____

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5. On the average, how many times a month does he/she miss work or come in late? _____

6. Did his/her job duties change during the time employed by you? Yes or No _____

If yes, how? _____

7. Did he/she improve or advance while on the job? _____

8. How well did he/she relate to other people? _____

Specifically: Superiors? _____

Peers? _____

Subordinates? _____

9. Could you comment on degree of supervision needed? _____

10. Could you comment on his/her overall attitude? _____

11. Given the following categories, how would you rate his/her overall work performance:

Above Average _____ Average _____ Below Average _____

12. If given the opportunity to rehire this person, would you do so? Yes _____ or No _____

Thank you taking time to respond to my questions.

Additional Comments: _____

Reference Check Performed by: _____ Date: _____