SOUTH TEXAS COLLEGE
EMPLOYMENT REFERENCE CHECK-
PROFESSIONAL WORK EXPERIENCE DOCUMENTATION

APPLICANT__________________________ POSITION ______________________

Name of Former Employer____________________ Phone ________________

Person Contacted____________________ Title ______________________

Sample script: “This is________________________, __________________________

Name title

and I work at South Texas College.______________________________ is being

Name-applicant

considered for________________________, with our college. Any additional

position

information you can give us would be a great benefit to assist us in making a hiring

decision._______________________________ has given his/her consent to check

his/her employment with you.

What was your employment relationship with_______? ______________________

How long did you supervise (work with) him/her? ______________________

What was___________________ ’s position/job title? ______________________

What was the beginning date of employment? ________ Ending date? ________

What were the duties and responsibilities of his/her position? ______________________

_____________________________________________________________________

_____________________________________________________________________

What were his/her strengths? __________________________________________

What areas for improvement? _________________________________________

What leadership capabilities did she/he have? ____________________________

_____________________________________________________________________

Describe how he/she got along with other employees? ______________________
Would you comment on his/her:

Attendance

Dependability

Ability to take on responsibility

Ability to work under pressure

Degree of supervision needed

Quality of work

Quantity of work and timeliness

What was the reason ____________ left your organization? ______________

________________________________________________________________________

Would you re-hire? __________________________________________________________________

Do you have any additional comments you wish to tell me? ______________________

________________________________________________________________________

________________________________________________________________________

Thank you for your assistance.

Reference checked performed by ___________________________ Date __________

(Must be performed by a Professional/Technical Staff (exempt) member or higher)

Reference check reviewed and accepted by ____________________________

(Must be signed by an Administrator or higher)