

## Reference Check Control Form

<b>Applicant Name:</b>	<b>Position:</b>	
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<b>Employment references checked:</b>		
<b>Name:</b>	<b>Employer:</b>	<b>Telephone:</b>
<b>Title:</b>	<b>Dates of employment:</b>	<b>Date Contacted:</b>
<b>Relationship:</b>	<b>Pay:</b>	<b>Method of contact:</b>
<b>Would you rehire?</b>	<b>Reason for termination:</b>	
<b>Notes:</b>		

  

<b>Name:</b>	<b>Employer:</b>	<b>Telephone:</b>
<b>Title:</b>	<b>Dates of employment:</b>	<b>Date Contacted:</b>
<b>Relationship:</b>	<b>Pay:</b>	<b>Method of contact:</b>
<b>Would you rehire?</b>	<b>Reason for termination:</b>	
<b>Notes:</b>		

  

<b>Name:</b>	<b>Employer:</b>	<b>Telephone:</b>
<b>Title:</b>	<b>Dates of employment:</b>	<b>Date Contacted:</b>
<b>Relationship:</b>	<b>Pay:</b>	<b>Method of contact:</b>
<b>Would you rehire?</b>	<b>Reason for termination:</b>	
<b>Notes:</b>		

  

<b>Personal references checked:</b>	
<b>Name:</b>	<b>Telephone:</b>
<b>Relationship:</b>	<b>Date Contacted:</b>
<b>Dates of relationship:</b>	<b>Method of contact:</b>
<b>Notes:</b>	

  

<b>Name:</b>	<b>Telephone:</b>
<b>Relationship:</b>	<b>Date Contacted:</b>
<b>Dates of relationship:</b>	<b>Method of contact:</b>
<b>Notes:</b>	

  

<b>Name:</b>	<b>Telephone:</b>
<b>Relationship:</b>	<b>Date Contacted:</b>
<b>Dates of relationship:</b>	<b>Method of contact:</b>
<b>Notes:</b>	

  

<b>Records checked:</b>		
<input type="checkbox"/> <b>School records</b>	<b>Date Requested:</b>	<b>Notes:</b>
<input type="checkbox"/> <b>Criminal records</b>	<b>Date Requested:</b>	<b>Notes:</b>
<input type="checkbox"/> <b>Driving records</b>	<b>Date Requested:</b>	<b>Notes:</b>
<input type="checkbox"/> <b>Credit records</b>	<b>Date Requested:</b>	<b>Notes:</b>

