



CHARLES CITY COUNTY PUBLIC SCHOOLS

10035 Courthouse Road Charles City, Virginia 23030

804-652-4649 Human Resources | 804-829-2363 Fax

REFERENCE FORM

Directions: Please forward to an individual who is familiar with your work performance and request that this form be completed and returned to this office as soon as possible. One of your references should be from your current supervisor. Please do not have relatives complete the reference form.

Applicants should sign the waiver below which give this referent permission to complete the form.

Waiver: I hereby request and give permission for you to act as a reference on my behalf. Please complete this questionnaire concerning my qualifications in regard to the position I am seeking with Charles City County Public Schools.

Print your Name	Signature of the applicant
Position Applying for	Date of the Request
Print your Name	Signature of the referent
Title/Position in the organization	Organization
Business Phone Number	Date completed

To what level does the candidate Demonstrate or Exhibit the following behaviors:	Superior	Above Average	Satisfactory	Less than Satisfactory	Unknown
1. Knowledge In The Area Of Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Prompt & Punctual Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Integrity & Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Motivation & Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Classroom Management: Equity, Order, & Just	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Dependability: Completes Assigned Tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Organizational Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Cooperation: Ability To Work Easily With Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Logical & Rational Problem-Solving Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. An Ability To Follow Oral & Written Directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. A Consistent Use Of Sound Judgement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Written & Oral Communication Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. An Appearance Of Professional Business Attire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. An Acceptance & Use Of Constructive Criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Reliable & Courtesy Service To All Stakeholders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To what degree would you recommend this person?

- Enthusiastically Recommend
- Recommend
- Recommend With Reservations
- Would Not Recommend

Is This Individual Under Contract?

Position Held

Other Comments

Would You Re-Employ?

Dates of Employment: From To

Please Mail Or Fax Reference Form To:

Human Resources Department ♦ Charles City Public Schools ♦
10035 Courthouse Road ♦ Charles City, VA 23030 ♦ 804.829.2363 Fax