

JEFF TECH

576 VO TECH ROAD
REYNOLDSVILLE, PENNSYLVANIA 15851-6368
(814) 653-8265
FAX: (814) 653-8425

REFERENCE REQUEST

A copy of this form will be sent to your current/previous or personal/professional reference for them to complete and return.

APPLICANT AUTHORIZATION: I, _____ (print full name), hereby give permission for release of requested information to Jeff Tech to assist with the evaluation of my eligibility for employment. I release all persons and/or organizations involved from any and all liability associated with the release of this information. I understand that any information obtained will be kept confidential and I waive any right to access such information.

Applicant Signature

Social Security Number

Date

If former employment was under another name, please print former name here _____

APPLICANT: DO NOT WRITE BELOW THIS LINE
COPIES DEEMED AS VALID AS ORIGINAL

Please complete the requested information and mail to Director, Jeff Tech, 576 Vo Tech Road, Reynoldsville, PA 15851; fax to 814-653-8425; or scan and e-mail to tlgiles@jefftech.us. Your prompt response will be greatly appreciated.

TYPE OF REFERENCE: Employer Personal

Position previously held: _____ Dates of employment: _____

Reason for termination: _____

How long have you known the applicant and in what capacity? _____

Is applicant eligible for rehire? YES NO If NO, please explain: _____

PLEASE CHECK ONE OF THE FOLLOWING FOR BOTH EMPLOYER AND PERSONAL REFERENCE:

	Excellent	Good	Fair	Poor	Unable to Evaluate
Job Knowledge	<input type="checkbox"/>				
Quality of Work	<input type="checkbox"/>				
Attendance	<input type="checkbox"/>				
Adaptability	<input type="checkbox"/>				
Initiative	<input type="checkbox"/>				
Honesty	<input type="checkbox"/>				
Attitude	<input type="checkbox"/>				
Overall assessment	<input type="checkbox"/>				

Do you recommend for employment? YES NO

Additional Comments (Use back of form if necessary): _____

FORM COMPLETED BY:

Name (Signature)

Title

Date

THE SCHOOL OF CHOICE

Jeff Tech does not discriminate on the basis of race, color, national origin, sex, disability or age in its programs and activities and provides equal access to the Boy Scouts and other designated youth groups. The following person has been designated to handle inquiries regarding the non-discrimination policies: Barry Fillman, Administrative Director, 576 Vo Tech Road, Reynoldsville, PA, 15851, 814-653-8265 ext. 119

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