## **Telephone Reference Check Form**

Reference Name:	Phone Number:
Applicant Name:	
<b>Duties Include:</b>	
In your opinion, what are	the individual's abilities in these areas?
Dates of Employment:	to
Title:	Duties:
Salary:	Eligible for Rehire?
What were the individual	's main job duties with your company?
How well did the individu	nal perform these duties?
Did the individual handle	
Is the individual trustwor	thy?
How did the individual re	elate to other employees and his or her supervisor?
Additional comments:	
Interviewer:	Date:

This sample document contains information that you may use or modify for your practice's needs. Your needs may vary based upon the laws in your state. This document does not constitute legal advice.