



ATHLETICS

REFERENCE CHECK FORM

Prospective Staff Member's Name: _____

Reference Name: _____

Reference Professional Title/Organization: _____

Reference Email: _____

Reference Phone: _____

Reference Contacted by:

Employee's Name: _____

Date of Contact: _____

Mode of Contact: _____

1. What is the nature of your professional relationship with the candidate? _____

Other: _____

2. On a scale of 1-5, how well do you know the candidate? _____

3. On a scale of 1-5, how would you rate the candidate's quality of work? _____

4. Is there any reason why the candidate should not be allowed to work with minors? _____

5. Notes: