

UNIVERSITY of HOUSTON

REFERENCE CHECKING FORM

Candidate's Name _____ Date of Reference _____

Name of Reference: _____ Relationship to Candidate _____

Reference taken by _____ Refused to provide reference

Suggested Reference Script

_____ has applied to the University of Houston's _____
(Candidate's Name) (Name of Department)

as a/an _____ and has stated that he/she was in your employ
(Position Title)

from _____ to _____ in the capacity of _____ (Prior
Employment Dates) (Prior Position Title)

He/She has given us permission to contact you and I would like to ask you a few questions regarding his/her employment while with your organization. May I begin?"

Hire Date: _____ Separation Date: _____ Position Held: _____
(verify resume/application data)

Would you briefly describe what _____'s job duties were and degree of independence?
(Candidate's Name)

Were there opportunities for teamwork? Yes No If Yes, what role did _____ usually take on a team?
(Candidate's Name)

Did he/she prefer working alone or in groups? Alone In Groups

How would you describe his/her awareness of the needs of others, particularly customers and/or fellow team members? Do you remember any specific examples?

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Did _____ seem inclined to sacrifice quantity for quality or the reverse, quality for quantity?
(Candidate's Name)

If _____ didn't like something in the workplace, was he/she more likely to
(Candidate's Name)

identify the problem or to initiate correction or change?

What were _____'s particular strengths and what areas did he/she need improvement in?
(Candidate's Name)

In rating performance as **Excellent, Good, Adequate, Unsatisfactory**, how was his/her:
(Identify/inquiry about performance standards required for the position the candidate is being considered for at UH)

| | | | | |
|-----------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| Technical Ability | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Quality of Work | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Independent Problem-Solving | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Customer Service | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Ability to Take Instruction | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Ability to Accept Feedback | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Teamwork/Cooperation | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Leadership | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Effective Use of Time | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Attendance Record | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Other:..... | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Other:..... | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Other:..... | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |
| Other:..... | <input type="checkbox"/> E | <input type="checkbox"/> G | <input type="checkbox"/> A | <input type="checkbox"/> U |

Would you re-employ _____? Yes No If no, why not?
(Candidate's Name)

Any additional comments?