[Company Name]

**REFERENCE QUESTIONNAIRE**

# APPLICANT INFORMATION

|  |  |  |  |
| --- | --- | --- | --- |
| Forename |  | Surname |  |

# employment information

|  |  |  |
| --- | --- | --- |
| When did the applicant work for you? | Start Date: | End Date |
| What was their job title? |  |
| Please give a brief outline of their duties, level or responsibility, employees controlled, etc. |
|  |
|  |
|  |
| Reason for leaving? |  |
| Would you re-employ? | [ ]  Yes [ ]  No |
| If NO, please give reason: |
|  |
|  |
| Would you consider the applicant to be: | TrustworthyReliableHonestPunctual | [ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No |
| If their role involved working with children and/or vulnerable adults did you ever have any concerns regarding:  | Conduct towards service usersStandard of care of service usersProvision of personal care (if applicable)Ability to follow care plans | [ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No[ ]  Yes [ ]  No |
| Would you consider this applicant for a role working with children or vulnerable adults again?  | [ ]  Yes  [ ]  No | Please provide details if you have replied NO: |
| Please rate their work/ characteristics: | QualityQuantityDependabilityRelationships with colleaguesAttendanceDisciplinary Record | [ ]  Good [ ]  Average [ ]  Poor[ ]  Good [ ]  Average [ ]  Poor[ ]  Good [ ]  Average [ ]  Poor[ ]  Good [ ]  Average [ ]  Poor[ ]  Good [ ]  Average [ ]  Poor[ ]  Good [ ]  Average [ ]  Poor |
| Did the applicant have good control of staff? [ ]  Yes [ ]  No [ ]  n/a |
| Did the applicant maintain discipline and control? [ ]  Yes [ ]  No [ ]  n/a |
| Any other comments? |
|  |
|  |

# SIGNATURES

|  |  |  |  |
| --- | --- | --- | --- |
| Signed |  | Date |  |
| Print Name  |  | Job Title |  |
| Company Stamp(or send back with letter heading) |  |