[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: | | Trustworthy  Reliable  Honest  Punctual | 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 users  Standard of care of service users  Provision 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: | | Quality  Quantity  Dependability  Relationships with colleagues  Attendance  Disciplinary 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) |  | | |