

REFERENCE CHECK FORM

Under North Carolina General Statute 126, pre-employment references solicited by the University are confidential and may not be released to the applicant, employee or public. Use of this form by departments is recommended. Per the attestation section on the UNC Pembroke application, the applicant certifies that he/she has given true, accurate and complete information in their application, any response(s) to supplemental questions, and/or in any information contained in their attached Curriculum Vitae/Resume and other documents, to the best of their knowledge. In the event confirmation or additional information is needed in connection with their application or work history, he/she authorizes educational institutions, associations, registration and licensing boards, former employers and others to furnish whatever detail is available concerning their qualifications and work history to the University of North Carolina at Pembroke. He/she understands that electronic submission of their application indicates his/her consent to the University's verification of any information contained in their application. He/she authorizes investigation of all statements made in the application and understands that false information or documentation, or a failure to disclose relevant information, may be grounds for rejection of the application, disciplinary action or dismissal shall be mandatory if fraudulent disclosures are given to meet position qualifications. (Authority: N.C.G.S. 126-30, N.C.G.S. 14-122-1).

REFERENCE INFORMATION BEING REQUESTED ON:

Applicant's Name:

First

Middle

Last

REQUESTING DEPARTMENT INFORMATION: *(To be completed by the hiring department)*

Date of Request: _____

Name of Hiring Department: _____

Department Address: _____

Representative's Name: _____

Representative's Title: _____

Representative's Phone: _____

EMPLOYER INFORMATION:

(To be completed by previous/current employer if by mail; or by hiring department if by phone)

This reference information furnished by:

Phone

Number: _____

Mail

Address: _____

Date Completed: _____

Name of Employer: _____

Representative's Name: _____

Representative's Title: _____

Representative's Phone: _____

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If requested by Mail, please return to the Hiring Department's address listed above.

APPLICANT INFORMATION:

Applicant's Name: _____
First Middle Last

Employment Dates: From: _____ To: _____

Reason for Leaving: _____

Major Job Duties: _____

Special Skills: _____

Met job requirements in terms of quantity of work? Exceeded Requirements
 Met Requirements
 Did Not Meet Requirements

Met job requirements in terms of quality of work? Exceeded Requirements
 Met Requirements
 Did Not Meet Requirements

Cooperated with fellow employees and supervisors? YES NO

Usually came to work on time? YES NO

Absent more than 10 days (except vacation) in the last year of employment? YES NO
If Yes, please explain:

Received an oral or written warning for performance or conduct in the last year of employment? YES NO
If Yes, please explain:

Committed any serious misconduct while on the job? YES NO
If Yes, please explain:

Required close supervision? YES NO
If Yes, please explain:

Would you rehire (or retain) this person? YES NO
If No, why?

Has this employee ever committed workplace harassment? YES NO
If Yes, please explain:

Additional Comments/Explanations: _____