

CHRISTIAN COUNTY PUBLIC SCHOOLS

POST OFFICE BOX 609 * 200 GLASS AVENUE * HOPKINSVILLE, KY 42241 * PHONE (270) 887-7000

CONFIDENTIAL REFERENCE

TO THE APPLICANT:

Please send a copy of this form and preaddressed envelope to three (3) of the references listed in your employment application.

TO BE COMPLETED BY APPLICANT:

This form is being sent to: _____

Applicant's Name: _____ Social Security No.: _____

Position applied for: _____

I hereby give you permission to release this reference form to the Christian County Public Schools. I agree that the information requested will become a part of my personnel file as an applicant or employee of the Christian County Board of Education, and I agree that the information will not be disclosed to me, but is to be treated as confidential by the Christian County Board of Education. I waive my right to see this information. I further release and agree to hold harmless the Christian County Board of Education and the persons and/or legal entities completing the reference form from any and all claims, demands, actions, and causes of actions which I might have resulting from the furnishing or utilization of the information requested and/or provided.

Applicant's Signature: _____

Date: _____

CONFIDENTIAL

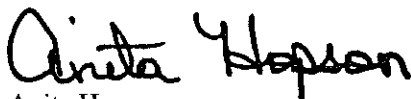
TO THE REFERENCE SOURCE:

The above named person has filed an application for employment with the Christian County Public Schools. In completing the application, the applicant has indicated that you may be able to help us in evaluating his/her potential as an employee.

Will you please help us by completing the inquiry on the reverse side of this letter and adding any comments you may care to make?

Your cooperation and promptness in returning this inquiry to us will be greatly appreciated.

Sincerely,



Anita Hopson
Director of Personnel
Christian County Public Schools

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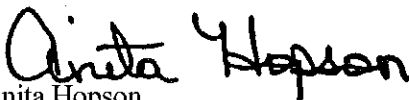
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Sincerely,



Anita Hopson
Director of Personnel
Christian County Public Schools

Applicant's Name _____

OFFICIAL CONFIDENTIAL INFORMATION

Based on your experience, please rate the applicant as follows:

Please indicate by checking	Outstanding	Above Average	Average	Fair	Below Average	Unknown
Professional reliability and attitude						
Participation in school and community activities						
Maturity in social and intellectual areas						
Regularity of attendance						
Responsibility in areas of morality						
Supports school policies						
Acceptance of constructive supervision						
Cooperation with administration and faculty						
Concern for the individual child						
Success in teaching (known or projected)						
Capability in curriculum, materials, techniques						
Ability to control classes						
Enthusiastic and vivacious in teaching						
Personal Appearance						
Use of English						
Punctuality						
Attitude toward work						

How long have you known applicant? _____

Would you recommend employment of the applicant as a teacher? Yes ___ without reservations ___ with reservations ___
Cannot recommend ___ Explain: _____

Would you want this person to work with **your child** in an educational setting? Yes ___ No ___

Information given above is based on (check items which apply):

Personal acquaintance with applicant ___ Worked under my supervision ___ Student in my classes at school ___
A co-worker ___ Student teacher under my supervision ___

REMARKS: _____

_____ Firm or School

_____ Street Address

_____ City, State, Zip

_____ Signature

_____ Position

_____ Phone