Reference Request for Employment with the State of West Virginia

To: ___________________________________________ Date: _________________________

___________________________________________

___________________________________________ Telephone: ______________________

Attention: ___________________________________________

Agency Requesting Reference: _______________________________________________________________

Contact Name: __________________________________________________________________________

Contact Title: ___________________________________________ Telephone: ____________________

Reference Request For: _________________________________ Sought: __________________________

The applicant named above has provided your name as a reference; a signed release is provided below. We would appreciate it if you would verify the information provided by the applicant on the attached form and answer the additional questions. A return envelope is provided for your convenience. If any applicant-provided information is incorrect, simply strike through it, write in the correct information, and initial. If you have any questions, please contact the requesting agency listed above.

Release of Liability

I am being considered for employment with the State of West Virginia, and have willingly consented to having my references contacted for information regarding my employment, volunteer, or other activities. Accordingly, I authorize all current and former employers, educational institutions, governmental entities, organizations or individuals to truthfully respond to the enclosed reference request and to provide all the information requested. On behalf of my heirs, assigns, successor interests, and me I hereby forever release and hold harmless any and all persons, who request and/or furnish any information, from any liability or damage whatsoever, under any and all possible causes of legal action, which may result because of truthful responses to this request for information. I also hereby knowingly and permanently waive any rights I may have to examine or discover the contents of the provided reference.

A facsimile or photocopy of this authorization is as effective and valid as the original. If I am hired, your response will remain on file at the referenced agency. Please provide the requested information within ten (10) days of the date of this release so that I may receive further consideration for employment.

Applicant
Signature: ___________________________________________ Date ______________________________
Reference Request for Employment with the State of West Virginia

APPLICANT-PROVIDED INFORMATION:

Applicant Name: ________________________________________________________________

Previous/Other Name if Used for This Position: _______________________________________

Please Check One:  

[ ] Employee  [ ] Volunteer  [ ] Contractor  

[ ] Other - (Please Explain): ______________________________________________________

Position Held: From: ____________________

___________________________________________________________ To: ____________________

Reason for Leaving: ______________________________________________________________

Description of Duties:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

I believe this employer (check one)  [ ] would  [ ] would not reemploy me in the same or similar position.

My supervisor would say that my work was (state how your supervisor would rate your work performance)

________________________________________________________________________________

________________________________________________________________________________

Rate of pay at time employment ended:

$________________ per  [ ] Hour  [ ] Week  [ ] Other __________________________
REFERENCE-PROVIDED INFORMATION: Please circle the appropriate number, with a 5 meaning a strong yes, 3 meaning met expectations, and 1 meaning a strong no.

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<tr>
<th>Statement</th>
<th>No</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>Yes</th>
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<td>Applicant exhibited a good work ethic.</td>
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<td>Applicant demonstrated appropriate interpersonal skills with his/her peers.</td>
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<td>Attendance was satisfactory.</td>
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<td>Applicant was responsible and showed initiative.</td>
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<td>Applicant’s skills were satisfactory and he/she generally completed his/her work without errors.</td>
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<td>The applicant was committed to good performance and meeting his/her goals.</td>
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<td>The applicant was able to understand and follow instructions.</td>
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</table>

Please add any appropriate job-related comments about the applicant, particularly regarding any rating of “1” above:

_________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________

How were you associated with the applicant?

- Coworker
- Supervisor
- Representative
- Other: ___________________________

Reference provided by:

Name: __________________________________________________________________________________
Title: __________________________________________________________________________________
Signature: ___________________________________________________ Date: ____________________

FOR AGENCY USE ONLY: If the reference is completed via telephone:

1) Complete the name and title [above] of the person providing the reference.
2) Advise that the responses are being recorded on this form.
3) Advise the reference provider that a copy will be sent to him/her in the mail.

Name of person documenting telephone reference: _________________________________
Title of person documenting telephone reference: _________________________________
Date: ____________________________

DOP Approved Form 2011