



The Polus Center for Social and Economic Development, Inc.

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## REFERENCE FORM

Date: \_\_\_\_\_

Person giving reference: \_\_\_\_\_

Polus Center Staff receiving reference: \_\_\_\_\_

1. How long did \_\_\_\_\_ work at this specific job?

\_\_\_\_\_

2. What were his/her responsibilities? \_\_\_\_\_

\_\_\_\_\_

3. How dependable was he/she? How was her/his attendance? How much sick time did she/he use? \_\_\_\_\_

\_\_\_\_\_

4. What are her/his strengths? \_\_\_\_\_

\_\_\_\_\_

5. What are his/her weaknesses? \_\_\_\_\_

\_\_\_\_\_

6. How did she/he get along with coworkers? \_\_\_\_\_

\_\_\_\_\_

7. How well did she/he respond to supervision? \_\_\_\_\_

8. Do you feel that this individual would do well working with developmentally disabled adults? Would this type of job be suitable for them? \_\_\_\_\_

\_\_\_\_\_

9. Would you rehire this person? \_\_\_\_\_

10. Additional Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_