



SWEETWATER UNION HIGH SCHOOL DISTRICT

Human Resources Department

1130 Fifth Avenue • Chula Vista, CA 91911-2896
Phone (619) 691-5530 Fax (619) 420-6836 & 407-4905

www.suhisd.k12.ca.us

I, _____ HAVE APPLIED FOR A POSITION AS _____
(PRINT NAME) (JOB TITLE)

WITH THE SWEETWATER UNION HIGH SCHOOL DISTRICT AND WOULD APPRECIATE YOUR COMPLETING THE REFERENCE FORM BELOW AND MAILING IT DIRECTLY TO THE SWEETWATER UNION HIGH SCHOOL DISTRICT. THANK YOU FOR YOUR ASSISTANCE.

(SIGNATURE)

MY NAME, WHILE EMPLOYED WITH YOU, WAS _____ I WAS EMPLOYED
 AS _____ BY YOU, FROM _____ TO _____
(JOB TITLE) (MONTH/YEAR) (MONTH/YEAR)

DATE: _____ SOCIAL SECURITY NUMBER: _____ - _____ - _____

NOTE: Please mail this reference form directly to the Sweetwater Union High School District. DO NOT RETURN IT TO THE APPLICANT. Your reply will be kept in strictest confidence by the Sweetwater Union High School District.

I have known the person named above during the period from: _____ to: _____
(MONTH/YEAR) (MONTH/YEAR)

During that time my **PROFESSIONAL** relationship to him/her has been that of: _____
(EMPLOYER, ETC. – PLEASE EXPLAIN)

Position(s) held by the applicant during that time period: _____
(JOB TITLE, STUDENT STATUS – PLEASE EXPLAIN)

In my opinion, the applicant's **STRONGEST** points are: _____

His/Her **WEAKEST** points are: _____

Based upon my observations, **I WOULD – WOULD NOT** (← CIRCLE ONE) recommend this applicant for the position(s) identified with the Sweetwater Union High School District.

I WOULD RATE THE APPLICANT IN RELATION TO OTHER EMPLOYEES OR STUDENTS I HAVE KNOWN AS FOLLOWS:	EXCELLENT	ABOVE AVERAGE	AVERAGE	BELOW AVERAGE	NO DATA
DEPENDABILITY/RELIABILITY					
SAFETY CONSCIOUSNESS: SELF, SAFETY OF OTHERS, EQUIPMENT					
ACCEPTANCE OF DIRECTION/CHANGE					
ABILITY TO WORK WITH OTHERS					
ATTITUDE TOWARD SUPERVISION					
WORK SKILLS: QUALITY, THOROUGHNESS, ACCURACY, QUANTITY					
ATTENDANCE: ABSENTEEISM, TARDINESS					

NAME OF PERSON COMPLETING THIS FORM (Please Print)

SIGNATURE

TITLE

DATE

COMPANY NAME

COMPANY ADDRESS, CITY, STATE, ZIP

TELEPHONE NUMBER