



SAN FELIPE DEL RIO C.I.S.D.

DEPARTMENT OF HUMAN RESOURCES

P.O. DRAWER 428002 • DEL RIO, TEXAS 78842 • (830) 778-4014 • FAX (830) 778-4909

EMPLOYMENT REFERENCE AUXILIARY/PARA-PROFESSIONAL/SUBSTITUTE

SECTION 1. TO BE COMPLETED BY THE APPLICANT:
UPON COMPLETING THIS SECTION, PLEASE FORWARD TO A FORMER SUPERVISOR INSTRUCTOR.

Applicant's Name: _____ Last 4 of SSN#: _____

Position Applying for: _____

Reference Name _____ Title _____

Company/School _____ Telephone # _____

AUTHORIZATION STATEMENT

I have applied for employment with the San Felipe Del Rio C.I.S.D. I authorize SFDRCISD to collect any information orally or in writing about my qualifications and past performance. I will not hold you or the organization liable for supplying any information regarding my employment/education. Thank you for your assistance.

Signature _____ Date _____

SECTION II. TO BE COMPLETED BY REFERENCE:
PLEASE RATE THE APPLICANT BY CHECKING THE APPROPRIATE BOX BELOW.

CHARACTERISTICS	STRONG	ACCEPTABLE	NOT ACCEPTABLE	NO BASIS TO JUDGE/COMMENTS
General appearance, appropriate dress, grooming				
Exercises professional judgment in absences from work				
Accepts constructive criticism and supervision				
Communicates information effectively				
Demonstrates good judgment				
Establishes personal growth and career path				
Effectively diagnoses and addresses situations or conditions				
Displays a practical approach to problem solving				
Inspires cooperation and confidence				
Provides support and assistance when needed				
Is knowledgeable and current in field				
Is receptive to new ideas and changes				
Handles matters in a fair and consistent manner				
Demonstrates knowledge of skill area				

Would you employ or rehire the applicant? Yes No

REMARK: (This is especially significant.)

Reference Signature

RELATIONSHIP TO THE APPLICANT

(Check items which apply)

- Worked under my supervision
 Co-worker
 Student in my classes at school
 Student teacher under my supervision
 Employer
 Other

_____ Date