

# Goochland County Public Schools

P. O. Box 169 – Goochland, Virginia 23063-0169

(804) 556-5316 – FAX: (804) 556-3847

[www.glnd.k12.va.us](http://www.glnd.k12.va.us)

## **REFERENCE EVALUATION – Certified Applicants**

The applicant listed below is formally applying for a position in the Goochland County Public School System. As part of our employee selection process, we request each applicant to forward a copy of this reference form to three persons who are uniquely familiar with his/her ability, potential and/or past performance. **Please return this form directly to GCPS, not the applicant.** We greatly appreciate your prompt reply. Your reply will be considered strictly confidential.

Name of Applicant: *(please print)* \_\_\_\_\_

Position Applicant is Applying for: \_\_\_\_\_

Name of Reference: \_\_\_\_\_ Title: \_\_\_\_\_

Address of Reference: \_\_\_\_\_

**TO APPLICANT:** Many people will not complete references unless confidentiality can be assured. If you wish this reference to be confidential, please sign and date the waiver of access below. All applications and accompanying records become the property of the district and are not available to candidates.

**WAIVER OF ACCESS:** I, THE UNDERSIGNED, WAIVE ANY RIGHT OF ACCESS TO THIS REFERENCE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please record in the boxes below a check from the following scale that describes your comparison of the above-named applicant with persons you have known with comparable years of experience.

PLEASE CHECK	Superior	Above Average	Average	Unsatis- factory	Unknown
1. Character (general conduct, ethics, morals)					
2. Knowledge of subjects taught					
3. Classroom management					
4. Skill in instruction					
5. Pupil relations					
6. Community relations					
7. Faculty relations					
8. Health					
9. Enthusiasm					
10. Personality					
11. Personal Appearance					
12. Professional attitude					

(Please Use Reverse Side For Additional Comments)

1. How long and in what capacity have you known the applicant? \_\_\_\_\_

2. What subject area(s)/grade level(s) did the applicant teach? \_\_\_\_\_

3. Please indicate exact dates of service: \_\_\_\_\_

4. Would you employ or re-employ this applicant? \_\_\_\_\_

5. Please include any additional comments which might aid us in the overall evaluation of this applicant: \_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person Completing Form

\_\_\_\_\_  
Title