



Pre-employment References

**City of Brunswick
Human Resources Department**

P.O. Box 550
Brunswick, GA 31520
912-267-5062
FAX 912-267-5065

TO: _____

(Name of Former Supervisor)

(Company Name of Former Employer)

(Address)

(City, State, Zip)

(Telephone)

I, (print your name) _____ am submitting an employment application to the City of Brunswick for the position(s) of:

1. _____ 2. _____ 3. _____

I cannot be considered for employment until my references are on file. Will you please complete the items listed below and mail this form to the City Human Resources Department. I hereby authorize you to release all records of employment, including assessments of my job performance, ability and fitness. I hereby release you from any and all liability of any type as a result of providing the following information to the above mentioned Company. Thank you.

Date: _____

(Signature)

FORMER EMPLOYER REFERENCE FORM

(Applicant: do not write below this line. To be completed by former employer)

1. Dates of employment with your organization: _____

2. Positions held with your organization: _____

3. Was the employee's overall performance:
Satisfactory: ___ Average: ___ Below Average: ___ Poor: ___

4. Was applicant absent: Never ___ Occasionally ___ Repeatedly ___

5. Was applicant's quality of work: Excellent ___ Good ___ Fair ___ Poor ___

6. Did applicant accept supervision: Well ___ Average ___ Fair ___ Poor ___

7. Why did employee leave your company? Resigned ___ Discharged ___ Laid Off ___ Other ___

8. If your policy permitted and if you had a vacancy, would you rehire this person? _____

If no, please explain: _____

9. Remarks: _____

Date: _____