MONTESSORI COUNTRY SCHOOL

P.O. Box 272, Herndon, VA 20172-0272, 703-437-8285

EMPLOYMENT REFERENCE REQUEST



То:		Re:				
(Name of Reference)				(Applicant's Name)		
	Organization)		I DO wa	ive the right to review this reference	•	
((Organization)		I DO NO	OT waive the right to review this ref	erenc	
(I	Phone Number)					
(1	Email Address)					
I,		, authorize any and all of my former employers and other				
	Applicant's Name) ons knowing me, to provide any and all information a elevant to consider me as a potential MCS employee.	about me that M	Iontessori	Country School (MCS) may determ	nine to	
(Sign	nature of Applicant)	(Date)				
	applicant should complete and sign this top section and tur ication. MCS will then contact your reference and ask hin					
	would appreciate your honest evaluation of the applic	-	perform t	the duties of this position.		
1.	How many years have you known this person?_		· · ·	A wa		
2.	Has this person ever been in your employ?		YES	□ NO		
If ye	es, dates of employment		Salary/	rate per hour		
Job t	title and brief description					
3.	Would you rehire?	Ø	YES	□ NO		
Reas	son for leaving:					
If vo	ou have not employed applicant, how do you know hir	m/her?				
11 y 0	a nave not employed applicant, now do you know in					

4.	Please rate this person in the specific areas designated below.						
		Good	Average	Poor			
	Job Skill						
	Trustworthiness						
	Character						
	Ability to Learn						
	Professionalism						
5.	Do you recommend this	person without rese	ervation?	YES 🗇	NO		
6.	Please add any additiona	al comments:					
	complete all information in y to the following address:	full, sign and return	n this form directly	to us via email <u>i</u>	nfo@mcsherndon.com or mailed		
Attn: I P.O. B	ssori Country School Director ox 272 on, VA 20172						
	you for your attention!						
Name:				Position/Title:			
Organi	zation:			Telephone:			
Signati	ure:			Date:			