



ARCHDIOCESE OF BALTIMORE
REFERENCE CHECK FOR PASTORAL/PROGRAM STAFF
Division of Human Resource Services

To:

Date:

Name of Applicant:

Position sought:

Please use the following guide in completing the next portion of this form:

| 1. | 2. | 3. | 4. | 5. |
|---|--|--|---|--|
| OUTSTANDING | GOOD | ACCEPTABLE | UNSATISFACTORY | UNKNOWN |
| Exceeds agreed-upon standards; performance and growth serve as a goal for others. | Meets agreed-upon standards; accepts recommendations for improvement and evidences growth. | Is aware of standards; further growth desirable. | Does not meet agreed-upon standards; has not evidenced improvement. | No opportunity to observe or no knowledge of applicant in this area. |

| PLEASE CHECK THE APPROPRIATE NUMBER: | 1 | 2 | 3 | 4 | 5 |
|---|----------|----------|----------|----------|----------|
| Interpersonal Relationships with: Children | | | | | |
| Youth | | | | | |
| Young Adults | | | | | |
| Adults | | | | | |
| Parents | | | | | |
| Co-workers | | | | | |
| Administrators/Supervisors | | | | | |
| Pastors/Clergy | | | | | |
| Respect for the Value of the Individual | | | | | |
| Competence in Performance of Duties and Responsibilities | | | | | |
| Knowledge of Current Theory and Practice in Position Sought | | | | | |
| Knowledge of Theology and Scripture | | | | | |
| Administrative Ability | | | | | |
| Ability to Motivate | | | | | |
| Ability to Work Under Pressure | | | | | |
| Competence in Conflict Resolution | | | | | |
| Written Communication Skills | | | | | |
| Oral Communication Skills | | | | | |
| Punctuality | | | | | |
| Attendance | | | | | |

(A) How long have you known this applicant? _____ In what capacity? _____

(B) To the best of your knowledge, has this applicant ever been charged with, accused of, or convicted of child abuse or sexual abuse? Yes No If Yes, please explain:

(C) Do you recommend that this applicant be employed for the position sought?
 Yes No With reservations _____ (please clarify)

(D) If applicant is a former employee:
Dates of employment: From _____ To _____; Full-time _____ Part-time _____

Position held: _____

Reason for termination: _____

Would you re-employ this person? Yes _____ No _____

Please use the space below to give additional information which may be helpful in our consideration of this applicant:

Signature _____ Date _____ Position _____

School/Company _____

PLEASE RETURN THIS FORM TO:

Division of Human Resource Services
Archdiocese of Baltimore
320 Cathedral Street, Rm. 619
Baltimore, MD 21201

THANK YOU FOR YOUR ASSISTANCE!