

**EMPLOYMENT FORM FOR PREVIOUS EMPLOYER
 CLASSIFIED EMPLOYEES**

Previous employer name _____

To Whom It May Concern:

I, (print name) _____ S.S. Number _____ have applied for a (please name position) _____ with the East Allen County School Corporation. I am hereby authorizing you to give the East Allen County School Corporation all information requested below concerning my employment with your firm from _____ to _____. I consent to the release of reference information to the East Allen County School Corporation, and hereby release, discharge and waive any and all claims which may arise against you, my previous employer for the release of accurate reference information.

Thank you,

 Signature

CONFIDENTIAL - INFORMATION BELOW WILL NOT BE SHARED WITH THE APPLICANT

TO BE COMPLETED BY PAST EMPLOYER

Applicant Name _____ S.S. Number _____

EACS position applied for _____

Dates of employment _____ to _____

Position held _____ Salary Hourly _____ Yearly _____

Reason for leaving _____

Would you re-employ? Yes _____ No _____ If "No", please state _____

Please check

	Excellent	Satisfactory	Unsatisfactory
Work Habits			
Attendance	_____	_____	_____
Punctuality	_____	_____	_____
Observance of work rules	_____	_____	_____
Attitude			
Works willingly	_____	_____	_____
Works well with others	_____	_____	_____
Shows initiative	_____	_____	_____
Does more than required	_____	_____	_____
Observes safety rules	_____	_____	_____
Performance			
Quality of work	_____	_____	_____
Quantity of work	_____	_____	_____
Demonstrates good judgement	_____	_____	_____
Completes tasks assigned	_____	_____	_____
Personal Habits			
Personal appearance	_____	_____	_____
Professional attitude	_____	_____	_____

Additional comments:

Signed _____ Date _____
 Position _____