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Reference form

Name of contact:
Position:
Company:
Address:
Tel:

Please confirm that:

Name of candidate:
Date of birth: was employed by your organisation.
From: to:
in the position of:

How would you rate this person for:

| | | | | | |
|---------------------|---------------------------------|----------------------------|----------------------------------|----------------------------|------------------------------------|
| Timekeeping | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Acceptable | <input type="radio"/> Poor | <input type="radio"/> Unacceptable |
| Work performance | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Acceptable | <input type="radio"/> Poor | <input type="radio"/> Unacceptable |
| Teamwork | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Acceptable | <input type="radio"/> Poor | <input type="radio"/> Unacceptable |
| Attendance | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Acceptable | <input type="radio"/> Poor | <input type="radio"/> Unacceptable |
| Attitude | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Acceptable | <input type="radio"/> Poor | <input type="radio"/> Unacceptable |
| Honesty & integrity | <input type="radio"/> Excellent | <input type="radio"/> Good | <input type="radio"/> Acceptable | <input type="radio"/> Poor | <input type="radio"/> Unacceptable |

What reason was given for leaving?
.....
.....
.....

Would you be happy to re-hire this person? Yes No

Please add any other comments you wish to make:
.....
.....
.....

Signed:

Date: