

REFERENCE CHECK TEMPLATE

Applicant: _____ **Phone:** _____

Position applied for: _____ **Date:** _____

Date: _____ **Time:** _____

Reference's details: _____ **Title:** _____

Clinic name: _____ **City:** _____

Reference check conducted by: _____ **Title:** _____

Introduction	Circle Or Fill In information
<p>Hello, my name is _____.</p> <p>I am contacting you to conduct a reference check for _____ who is being considered for a _____ position at _____.</p> <p>Are you willing and prepared to provide a reference?</p>	<p style="text-align: center;">Yes</p> <p style="text-align: center;">No</p>
<p>This reference check will take approximately 10 minutes to complete.</p> <p>Is this a good time for you?</p> <p>If this is not a good time for you, when would be a convenient time for us to continue this conversation?</p>	<p>Proceed Yes No</p> <p>Call back on _____</p> <p style="padding-left: 100px;">@ _____ hrs</p> <p>At the same phone number? _____</p> <p>Alternative phone number? _____</p>
<p>Please note that your comments will be used in the evaluation of the applicant and will affect whether they are selected for the job. The information you provide may be given to the candidate if they request it.</p> <p>Do I have your permission to proceed?</p>	<p style="text-align: center;">Yes</p> <p style="text-align: center;">No</p>
<p>NOTES:</p>	

#201-4480 West Saanich Road, Victoria, BC V8Z 3E9 Phone-250-658-3303 Fax-250-658-3304 e-mail info@sidfp.com

General Questions	
What is/what your relationship with the applicant?	
In what capacity is/was the applicant employed by your clinic?	
What were the dates of their employment?	From: _____ To: _____
What were their duties and responsibilities?	
Was the applicant fired, or did they leave on their own?	Fired Left on their own
What is the reason they are no longer employed by your clinic?	

#201-4480 West Saanich Road, Victoria, BC V8Z 3E9 Phone-250-658-3303 Fax-250-658-3304 e-mail info@sidfp.com

<p>How would you describe the applicant's overall work performance?</p>	
<p>What are the applicant's strengths when working with colleagues and/or patients?</p> <p>Can you provide an example?</p>	
<p>What are the areas (if any) that the applicant could work on when working with colleagues and/or patient?</p>	
<p>Can you provide an example?</p>	
<p>Was the applicant made aware of this and what was their response?</p>	

#201-4480 West Saanich Road, Victoria, BC V8Z 3E9 Phone-250-658-3303 Fax-250-658-3304 e-mail info@sidfp.com

<p>If yes, are you able to explain when these issues were identified, when they were discussed with the applicant, what they did to improve and what progress was made.</p>	
<p>Please comment on the applicant's:</p> <ul style="list-style-type: none"> ▪ Reliability ▪ Punctuality ▪ Attendance ▪ Professionalism 	
<p>Job-specific duties:</p> <ul style="list-style-type: none"> ▪ Open/close ▪ EMR ▪ Scheduling ▪ Scanning ▪ Linking ▪ Ushering ▪ Room preparation ▪ Autoclaving ▪ Reception ▪ Telephone ▪ Emails ▪ Website maintenance 	

#201-4480 West Saanich Road, Victoria, BC V8Z 3E9 Phone-250-658-3303 Fax-250-658-3304 e-mail info@sidfp.com

#201-4480 West Saanich Road, Victoria, BC V8Z 3E9 Phone-250-658-3303 Fax-250-658-3304 e-mail info@sidfp.com
