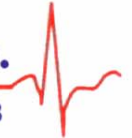




Clifton Park & Halfmoon Emergency Corps Inc.

P.O. Box 1469 • CLIFTON PARK, N.Y. 12065 • (518) 371-3880 • Fax: (518) 371-7623



CONFIDENTIAL REFERENCE QUESTIONNAIRE

Applicant Name (print)

Release (to be filled out by applicant)

The release of confidential and/or personal information for the use in consideration for membership is hereby authorized. Persons, agencies, organizations and businesses are released from any and all liability or damages resulting from reference disclosure.

Applicant (signature)

Date

----- *To be completed by reference* -----

Reference Name (print)

The above applicant has applied for membership at the Clifton Park & Halfmoon Emergency Corps. As part of the approval process, our agency must review a minimum of three (3) written references, and you have been chosen as one of the applicant's references.

Please answer the questions as accurately and honestly as possible. Negative comments will not necessarily prohibit membership, as having some faults is normal and it is best to acknowledge them early, then to be identified later by us. Your responses will be confidential, and not divulged to the applicant. Please take the time to complete this as the application approval process hinges on your timely response.

Please feel free to contact the Human Resource Supervisor if you have any questions.

Thank you for your time.

(1) How long have you known the applicant, and in what capacity?

(2) Please describe the applicant in your own words:

(3) Please describe the applicant's trustworthiness, reliability and dependability.

(4) Have you ever seen the applicant deal with a stressful situations? How did they do?

(5) Have you ever seen the applicant in a personal confrontation? Please summarize how
The applicant handled this. If not, how do you feel they would handle confrontation?

(6) List the applicant's BEST qualities.

(7) List the applicant's WORST qualities.

(8) Anything you may want to add about the applicant.

Reference Information (optional):

Address

City / State

Zip code

Telephone number

Best time to contact you

Reference (signature)

Date