



Gainesville City Schools System Applicant Telephone Reference Form

Applicant _____ SSN (last four digits) _____

Position Applied For _____ Administrator/Caller _____

Information Obtained From _____ Position _____

Dates of Employment or Observation From _____ to _____

Ask specific related to your priorities of the successful teacher.

Comments:

1. Classroom management _____

2. Teaching Skills _____

3. Attendance/punctuality _____

4. Ability to get along with others _____

5. Ability to get along with supervisor _____

6. Reaction to criticism _____

7. Is there any reason you know that should prevent me from hiring? _____

8. Would you employ or re-employ to work directly with you? _____

9. Would you recommend (circle one):

Without reservation

With reservation

No

Comments:
