



Reference Form for Substitute Teacher Candidates

Candidate Name: _____ Date: _____
Name of Reference: _____ Title/Position: _____
(____) _____ (____) _____ (____) _____
Home phone Work phone Cell phone Email address

1. How long have you known the candidate and what is the nature of your relationship (supervisor, colleague, friend, etc.)

2. What are the candidate's three greatest strengths?

3. Have you ever observed the individual interacting with school-aged students? If so, how well does he/she interact with students?

4. How would you describe the candidate's work ethic?

5. Is there anything in the candidate's past that you think we should be aware of?

6. Would you hire/rehire this candidate?

Signature of individual completing reference check: _____

If Adobe Electronic Signature box does not appear (with a pink Signature Flag icon), try saving form to your computer, then open Adobe, then open file by going to File, Open, and locate where you saved the document.

Please return completed form and send as an attachment from your email to jshook@lncharter.org OR place inside a sealed envelope **with your signature across the seal** and mail to Lake Norman Charter, Attn: Business Office, 10019 Hambright Rd, Building A, Huntersville, NC 28078.