



500 North Harrison Street, Salem, Indiana 47167
 Phone 812 883-4437 Fax 812 883-1031
 www.salemschools.com

SALEM COMMUNITY SCHOOLS

EMPLOYMENT APPLICATION REFERENCE FORM

Salem Community Schools greatly appreciates your cooperation in the completion of the following information. We assure you that any information furnished will be held in strictest confidence. The Family Education Rights and Privacy Act of 1974 does not affect the confidentiality of your reference.

Please record a number from the following scale, which best describes the applicant named below. As you contemplate your score, compare the applicant with persons you have known with comparable years of experience and educational attainment.

Applicant Name _____

(4) Outstanding—Top 10%
(2) Average—Top 50%

(3) Above Average—Top 25%
(1) Below Average—Bottom 25%

Attendance, punctuality, dependability		Judgment and common sense	
Classroom management skills		Leadership potential	
Cooperation with others		Technology skills	
Correct use of standard English		Maturity (poise, self-control)	
Development of conducive learning environment		Rapport-building and motivation of students	
Effective Communication		Personal hygiene and grooming	
Enthusiasm for learning and teaching		Vitality	
Evaluation of pupil progress		Positive attitude toward supervision	
Flexibility		Potential for professional growth	
Ability to plan & implement instruction		Professional attitude	
Initiative		Relationship with peers	
Integrity			

How long and in what capacity have you known the applicant?

Have you seen the applicant teach?	Yes	No	NA
Would you employ this person?	Yes	No	NA
Is this a person you would like as your child's teacher?	Yes	No	NA
Would you prefer talking with us by telephone?	Yes	No	NA
For the position desired, I would recommend the applicant	Highly With Reservation	Favorably Not At All	

Additional Comments

 Date Signature of Reference Position