

**COUNTY DRIVER
EMPLOYER/REFERENCE CHECK
DOCUMENTATION SHEET**

Appendix B

Applicant Name: _____ Position Applied For: _____

Driving Potential: **REGULARLY** **FREQUENTLY** **LIMITED** **NON-DRIVER**
 (Daily function) (Weekly function) (Three trips or less per month) (No driving)

CDL Required: YES NO

Minimum Three-Year Employment/Reference History

Name **Employer/Ref 1:** _____

Spoke to: _____ at _____ am/pm on ____/____/____.

Supervised Applicant?	YES	NO	
Confirmed Salary/Title?	YES	NO	
Confirmed Term of Employment/relationship?	YES	NO	
Driving Performed by Applicant/acquaintance?	YES	NO	

Vehicle Type(s)? _____

How frequently did Applicant/acquaintance drive? _____

Any Preventable Accidents?	YES	NO	How many? _____
Eligible for Rehire, if applicable?	YES	NO	NA

Notes: _____

Name **Employer/Ref 2:** _____

Spoke to: _____ at _____ am/pm on ____/____/____.

Supervised Applicant?	YES	NO	
Confirmed Salary/Title?	YES	NO	
Confirmed Term of Employment/relationship?	YES	NO	
Driving Performed by Applicant/acquaintance?	YES	NO	

Vehicle Type(s)? _____

How frequently did Applicant/acquaintance drive? _____

Any Preventable Accidents?	YES	NO	How many? _____
Eligible for Rehire, if applicable?	YES	NO	NA

Notes: _____

Name **Employer/Ref 3:** _____

Spoke to: _____ at _____ am/pm on ____/____/____.

Supervised Applicant? YES NO

Confirmed Salary/Title? YES NO

Confirmed Term of Employment/relationship? YES NO

Driving Performed by Applicant/acquaintance? YES NO

Vehicle Type(s)? _____

How frequently did Applicant/acquaintance drive? _____

Any Preventable Accidents? YES NO How many? _____

Eligible for Rehire, if applicable? YES NO NA

Notes: _____

Name **Employer/Ref 4:** _____ Tel #: _____

Spoke to: _____ at _____ am/pm on ____/____/____.

Supervised Applicant? YES NO

Confirmed Salary/Title? YES NO

Confirmed Term of Employment/relationship? YES NO

Driving Performed by Applicant/acquaintance? YES NO

Vehicle Type(s)? _____

How frequently did Applicant/acquaintance drive? _____

Any Preventable Accidents? YES NO How many? _____

Eligible for Rehire, if applicable? YES NO NA

Notes: _____

Human Resources Section

Continue Hiring process? YES NO

If no, please explain: _____

Person Making Inquiry: _____ Date: _____

**EMPLOYERS/REFERENCES
CONTINUATION SHEET**

Appendix B

Name **Employer/Ref 5:** _____

Spoke to: _____ at _____ am/pm on ____/____/____.

Supervised Applicant? YES NO

Confirmed Salary/Title? YES NO

Confirmed Term of Employment/relationship? YES NO

Driving Performed by Applicant/acquaintance? YES NO

Vehicle Type(s)? _____

How frequently did Applicant/acquaintance drive? _____

Any Preventable Accidents? YES NO How many? _____

Eligible for Rehire, if applicable? YES NO NA

Notes: _____

Name **Employer/Ref 6:** _____

Spoke to: _____ at _____ am/pm on ____/____/____.

Supervised Applicant? YES NO

Confirmed Salary/Title? YES NO

Confirmed Term of Employment/relationship? YES NO

Driving Performed by Applicant/acquaintance? YES NO

Vehicle Type(s)? _____

How frequently did Applicant/acquaintance drive? _____

Any Preventable Accidents? YES NO How many? _____

Eligible for Rehire, if applicable? YES NO NA

Notes: _____
