

# Arizona State Personnel System

## PRE-EMPLOYMENT VERIFICATION AND REFERENCE CHECK FORM

See ASPSP/HRD-PA3.03, Application for Employment; Pre-employment Reference and Background Check policy for instructions and additional clarification. **Hiring agencies shall verify a candidate's most recent 5-year work history. Do not conduct a pre-employment check without a completed and signed Application for Employment form from the respective candidate confirming you may contact the current and/or previous employers.**

Candidate Name	Being Considered for (Job Title)	Job ID #
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**Section A (Employment History and Reference Checks)**  
**Note: Make a copy of this section if more than one reference is required**

Person Contacted and Position Title				
Phone Number	<input type="checkbox"/> Immediate Spv.	Work Nbr./Equiv.	HR Rep	Other
Organization Name & Location	Date of Contact	Last Rate of Pay		
Candidate's Job Title	Confirm Candidate's Dates of Employment			
Reason for ending employment	Current State Employee?	No	Yes	If yes, EIN

**If additional space is needed, document below or on Page 2 under the Additional Comments Section**

Briefly describe the duties and responsibilities the candidate is/was responsible for.

What do you believe are the candidate's strengths and skills?

**How would you describe the candidates:**

Ability to work well with coworkers, subordinates (if applicable), supervisors/management?

Attendance, punctuality, and reliability? Capacity for discretion, good judgment, decision making and problem solving?

Were/are they in a supervisory/management role? If yes, how would you characterize their supervisory/management skills?

Were/are there any behavioral or performance issues or any areas of development or coaching needed? If yes, what are they?

Is there any other pertinent performance information about this candidate that we should consider?

Would you rehire this candidate into your organization? No Yes If no, why not?

**Additional Comments:**

Section B (Degree, License or Certification)

**Note: Optional, if not required for position. If more than two institutions/organizations are contacted, annotate below in Additional Comments.**

Type of degree, license or certification			Expiration date
Name of School or credentialing organization			Date information verified
Is license or certification still in good standing?	No	Yes	
Type of degree, license or certification			Expiration date
Name of School or credentialing organization			Date information verified
Is license or certification still in good standing?	No	Yes	

Section C (Personnel File Review and Performance Appraisal Scores)

**Note: This section is required if the candidate is a current or former Arizona State Personnel System Employee**

Rating Period		Noteworthy comments	
Overall Score			
Rating Period		Noteworthy comments	
Overall Score			
Commendations	No	Yes	If yes, date and type
Disciplinary or Dismissal Actions	No	Yes	If yes, date, action and reason for action
Date SPS Personnel File reviewed		Name/signature of file reviewer	

**Additional Comments:**

*(Additional responses to questions, evaluation comments or attempts to demonstrate due diligence in obtaining reference checks)*

**Pre-employment Check Completed By**

Printed Name	Date
Signature	