



Referee Report

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| Applicant Name | |
| Vacancy Position Title | |
| Referee Name | |
| Referee Job Title | |
| Relationship to applicant | |
| Phone | |

Information from referees contributes to the assessment of an applicant’s suitability for the position and provides a written account of the applicant’s skills, knowledge, and abilities for each of the job requirements.

| Work Related Feedback | |
|---|--|
| Do you believe the applicant can undertake this role successfully? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If no, please include additional comments below | |
| Do they currently perform to, or above expectations? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If no, please include additional comments below | |
| Are there any aspects of their past performance that may benefit from further development or training? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If yes, please include additional comments below | |
| Can they build and maintain effective workplace relationships? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If no, please include additional comments below | |
| Would you re-employ them? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| If no, please include additional comments below | |

| Additional Comments |
|----------------------------------|
| Click or tap here to enter text. |

Declaration

I declare these comments are a true reflection of my knowledge of the applicant. I understand that the information contained within this report may be shared as part of the feedback process.

| | | | |
|------------------|--|--------------|-------------|
| Name: | | Date: | Select date |
| Signature | | | |

If returning this report by email, please check this box as your declaration and signature.