

REFERENCE CHECK CONSENT FORM

Teaching

NOTE: Please print clearly. Email addresses are preferred. One reference must come from your current employment supervisor. If you are not currently employed, one reference must come from your last employer.						
Name of Reference *Author of Performance Review or Practice Teaching Report	Employer	Position	Fax Number	Telephone Number	Email address	
*This section must be complete	d by teaching/promot	ional candidates. Offers of	employment are conditiona	I upon verification of qualific	ation and work experience.	
Date:	Signature:					

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