



Office of Human Resources, 4301 West Markham #566, Little Rock, AR  
72205-7199 [www.uams.edu](http://www.uams.edu) Office: 501-686-5650

Applicant # \_\_\_\_\_

**Employment and Education Reference Check Consent and Release**

I, \_\_\_\_\_, hereby give consent to any and all current or prior employers or schools, to provide the information requested below with regard to my employment and education history to the following:

Department \_\_\_\_\_ Contact \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**This consent is valid for a period of six (6) months from the date indicated below.**

Applicant Name: \_\_\_\_\_ Last Four of SSN: \_\_\_\_\_

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for assisting us with our screening process. Employment references are essential to our making informed hiring decisions. Please take a few minutes to complete the form below. We ask that you answer all of the questions as best as you can, even if you do not have direct experience working with the candidate in a particular area.

Company Name: \_\_\_\_\_ Dates of employment: \_\_\_\_\_

Current or last job title: \_\_\_\_\_ Current or last rate of pay: \_\_\_\_\_

Eligible for rehire: \_\_\_\_\_ Reason for separation: \_\_\_\_\_

<b>Any documented concerns in the last 12 months regarding the following:</b>	<b>YES</b>	<b>NO</b>
Attendance, Punctuality or Reliability other than for legitimate medical or family leave reasons?		
Integrity or effectiveness in handling the organization's resources for which they were responsible?		
Integrity or effectiveness in the professional interactions for which they were responsible?		
The ability to accept responsibility or maintain productivity on the assignments for which they were responsible?		
The ability to exhibit maturity, composure, or professional conduct under typical job stresses or challenges?		

**Please indicate your evaluation of the applicant with a check mark in the appropriate fields.**

	<b>Superior</b>	<b>Excellent</b>	<b>Good</b>	<b>Average</b>	<b>Below Average</b>
<b>Intellectual Ability</b>					
<b>Written Communication Skills</b>					
<b>Oral Communication Skills</b>					
<b>Relationships with Colleagues</b>					
<b>Relationships with internal/external Customers</b>					
<b>Adaptability</b>					
<b>Reaction to Constructive Criticism</b>					
<b>Leadership</b>					
<b>Conflict Resolution</b>					

**EDUCATION VERIFICATION:**

School Name: \_\_\_\_\_ Degree Earned: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ GPA Achieved: \_\_\_\_\_

Printed name of Representative providing information: \_\_\_\_\_

Signature of Representative providing information: \_\_\_\_\_ Date: \_\_\_\_\_

**This form must be maintained with interview records for a minimum of three years.**