

Previous Employment Reference

To Be Completed by the Applicant: Complete the top portion of this form. Send this form to your previous employer to complete. If you choose to wait to request this reference from your previous employer, you need to know that final acceptance into a Hazelden educational program is conditional on fulfilling this reference check. If you are choosing to not have your previous employer complete this form at this time, please explain your reason below.

Explanation: _____

Applicant's Name: _____

Address: _____

City/State/Zip: _____

Telephone: _____

I request and authorize _____ to release this and any other information to the Hazelden Graduate School of Addiction Studies. I understand the information will be used to help determine my appropriateness for candidacy in the program.

I do do not (circle one) waive my right to see the letter of reference.

Applicant's Signature

Date

To Be Completed by the Reference Writer:

1. Applicants dates of employment: _____ to _____

2. Applicant's job title: _____

3. Please give a brief description of the applicant's responsibilities: _____

4. Please rate applicant's performance in the following areas (write N/A next to any area that doesn't apply):

	Poor	Fair	Average	Good	Excellent
Dependability					
Cooperativeness					
Organizational skills					
Communication skills					
	Poor	Fair	Average	Good	Excellent

Supervision of others					
Decision-making					
Self-assessment skills					
Self-initiative					
Response to supervision					
Learning ability					

5. What recommendations did you make to applicant regarding improvement of his/her performance?

6. Would you re-employ applicant? Yes _____ No _____

7. Additional remarks:

Name: _____

Occupation: _____

Address: _____

Telephone: _____

Signature: _____ Date: _____

Since applications cannot be reviewed without reference material, a reply within two weeks of receipt of this reference will ensure prompt consideration of this applicant's credentials. Please return to the address below. You may also fax this form to the Graduate School at 651-213-4411. Thank you for your prompt response.

Hazelden Graduate School of Addiction Studies
CO9, PO Box 11
Center City, MN 55012-0011



888-257-7800, ext. 4175 or 651-213-4175
Fax: 651-213-4411
E-mail: graduateschool@hazelden.org
www.hazelden.org/graduateschool