



CORNING-PAINTED POST
AREA SCHOOL DISTRICT

Students are the center of all we do.

CONFIDENTIAL RECOMMENDATION

Name of Applicant _____

The applicant above has given your name as a professional reference.
Please complete this form to assist in assessing the candidate's qualifications.

1. How would you feel about employing this candidate?

_____ Eager _____ Willing _____ Hesitant _____ Unwilling

2. Comments on the candidate's overall potential:

3. How do you know the applicant? How long have you known him/her?

Reference Name _____ Position/Title _____

Phone Number () _____ E-mail _____

4. If you feel that a phone conversation regarding this applicant would be of value,
please check here and we will call you for a confidential discussion.

PLEASE RETURN COMPLETED FORM TO:

Personnel Services,
to the mailing address below or
by e-mail: staffjobs@cppmail.com or
by fax at 607-654-2725

