

Phone: (619) 691-5530

FAX: (619) 420-6836

SWEETWATER UNION HIGH SCHOOL DISTRICT Human Resource Services Division

1130 Fifth Avenue Chula Vista, CA 91911

Classified Reference Form

In the Sweetwater Union High School District and would appreciate your help in completing the reference form below and mailing it to the Sweetwater Union High School District at the address listed above. Thank you for your assistance. My name during my term of employment with you was result and the sweetwater Union High School District at the address listed above. Thank you for your assistance. My name during my term of employment with you was result and the sweetwater Union High School District. My name during my term of employment with you was result and the sweetwater Union High School District. To be Completed by the Person Provided The Reference To be Completed by the Person Provided The Reference I have known the person named above during the period (enter dates): My PROFESSIONAL relationship to the applicant has been that of: Position(s) held by the applicant during the referenced time period: Based on my opinion, the applicant's STRONGEST points are: Based on my observations regarding the applicant, I would would not recommend this applicant for the position(s) identified with the Sweetwater Union High School District. I would rate the applicant in relation to other employees or students I have known as follows: Very Name	APPLICANT						
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	Contact Information:			COMP	PANY NAME		
			ADDRESS				
NAME OF PERSON COMPLETING FORM ADDRESS	NAME OF PERSON COMPLETING FORM		ADDRESS				
JOB TITLE CITY	JOB TITLE		СПҮ				
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PHONE NUMBER STATE ZIP	PHONE NUMBER		STATE ZIP				
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"The Sweetwater Union High School District will fulfill the promise of 100% student success"