



Centenary College of Louisiana Police Department

Confidential Questionnaire to Employers

		Name of applicant:					
		!	to				
1.		ent dates listed correct? dates.		No			
2.	What were this p	person's primary duties?					
3.	What were his/h	er gross earnings per pay pe	riod?				
4.		s work considered to be satis scribe deficiencies		Yes	No		
 5.	Is this person eli	gible for re-hire?					
6.	What was the rea	ason for termination of emplo	yment?				
7.		gned, was the resignation vol ain.		Yes	No		
8.		roblem with absenteeism or e				No	
9.		get along well with supervisor lain.			olic? Yes I	No	
10.		any reason to doubt this personal perso		Yes	No		

11.	If No, please explain
12.	Did this person ever have any personal, domestic or financial problem that interfered with work? Yes No If Yes, please explain.
13.	Please describe this person's general reputation among co-workers and supervisors.
14.	Are you aware of any disciplinary actions taken against this person? Yes No If Yes, please describe situation.
15.	Did this person appear to keep calm under stress? Yes No If No, please explain.
16.	Describe applicant's strengths.
17. —	Describe applicant's weaknesses.
18.	Would you recommend this applicant for a position of trust and responsibility? Yes No If No, please explain.

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Please check the appropriate boxes regarding the applicant.

		Above	Avera	ge Below					
Appearance									
Dependability									
Cooperative									
Professionalism									
Judgment									
Leadership									
Self Confidence									
Job Knowledge									
Tactfulness									
Writing Skills									
Attention to Detail									
Capability									
Intelligence									
Responsibility									
Initiative									
Job Interest Punctuality									
							Maturity Well Organized		
Verbal Communication	า								
Expand on any of the above									
Are there any personal pro	blems in	these areas?							
Moral Character	Yes	No							
Alcohol Problem	Yes	No							
Drug Problem	Yes	No							
Loyalty	Yes	No							
Value Name -									
Your Name		Title							
Telephone Number			Date _						

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