

**Penn Fire Department Form**  
**Personal Reference Form**

Applicant Name: \_\_\_\_\_ D.O. B \_\_\_\_\_

Address: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

(Please answer all questions honestly and accurately)

**This Must Be Completed By The Personal Reference**

Name : \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

How do you know the Applicant? \_\_\_\_\_ How long have you known them: \_\_\_\_\_

**Please select which box accurately applies to the applicant:**

	<b>Excellent</b>	<b>Very Good</b>	<b>Good</b>	<b>Poor</b>	<b>Don't Know</b>
Communication Skills					
Work Quality					
Attitude					
Reliability					
Maturity					
Helpfulness					
Ability to work with others.					

**\*\*\*If you indicated applicant is "Poor" for any category please state your reasons below:**

If there is anything that you would like to share about the applicant that would be helpful us, please do so below.

Please sign below stating everything that you have written is honest and correct.

*Signature:* \_\_\_\_\_

*Thank you for your time and input.*

Please mail to

Penn Fire Department

13960 Jackson Rd

Mishawaka, IN 46544

Or

Scan and email to

Jvanbruaene@pennfire

Subject line: applicants name