

**REFERENCE CHECK QUESTIONNAIRE**

**APPLICANT'S NAME:**

**TITLE OF POSITION APPLYING FOR:**

It is the policy of the County of Yolo to conduct a thorough reference check on the most suitable applicants for positions. Generally, Yolo County requires three references. Please complete the information below for three references. At the discretion of the appointing authority, additional references may be required and additional reference inquiries may be conducted.

**NAME OF REFERENCE:** \_\_\_\_\_ **POSITION:**

**COMPANY:** \_\_\_\_\_ **RELATION TO APPLICANT:**

**ADDRESS:** \_\_\_\_\_ **PHONE NO:**

**CITY/STATE:**  
\_\_\_\_\_

**NAME OF REFERENCE:** \_\_\_\_\_ **POSITION:**

**COMPANY:** \_\_\_\_\_ **RELATION TO APPLICANT:**

**ADDRESS:** \_\_\_\_\_ **PHONE NO:**

**CITY/STATE:**  
\_\_\_\_\_

**NAME OF REFERENCE:** \_\_\_\_\_ **POSITION:**

**COMPANY:** \_\_\_\_\_ **RELATION TO APPLICANT:**

**ADDRESS:** \_\_\_\_\_ **PHONE NO:**

**CITY/STATE:**  
\_\_\_\_\_

**APPLICANT SIGNATURE:**