



# LIBERTY HEALTHCARE CORPORATION AND AFFILIATES (LIBERTY) LEADERSHIP REFERENCE FORM



Name of candidate: \_\_\_\_\_

Position applying for: \_\_\_\_\_

Full name and title of reference: \_\_\_\_\_

Organization name and phone number: \_\_\_\_\_

How long and in what capacity have you known this candidate?

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How would you appraise their competency?

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**\*\*Ask the following question ONLY if this is a CLINICAL position:**

Describe this candidate's ability to provide direction and leadership to clinical staff:

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Describe this candidate's supervisory skills and how effective they are:

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Describe this candidate's leadership skills:

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How would you describe their strategic planning abilities?

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Describe their project management skills:

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How would you describe their budget and administrative skills?

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How would you describe their ability to achieve expected organizational goals?

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How would you describe their rapport with the following stakeholders:

Clients: \_\_\_\_\_

Peers: \_\_\_\_\_

Subordinates: \_\_\_\_\_

Customers: \_\_\_\_\_

Describe how subordinates viewed him/her in relationship to effective management:

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Describe areas of strength:

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Described skills that may be underdeveloped:

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What type of working environment do they flourish within?

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If you had any reservations about recommending this candidate for the position what would they be:

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Additional comments:

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\_\_\_\_\_  
Printed Name of Person Taking the Reference

\_\_\_\_\_  
Signature of Person Taking the Reference

\_\_\_\_\_  
Date