

EMPLOYER REFERENCE FORM

Please affix your photograph here

RE: STATE NAME
NAME OF REFEREE
ADDRESS
PHONE NUMBER
WHAT IS YOUR RELATIONSHIP WITH THE EMPLOYEE?
HOW LONG HAVE YOU KNOWN THE EMPLOYEE?
PLEASE BRIEFLY COMMENT ON HIS /HER CHARACTER, INTEGRITY, ATTITUDE, PERFORMANCE AND OUTSTANDING QUALITIES BELOW:
DO YOU RECOMMEND HIM /HER FOR EMPLOYMENT IN OUR ORGANIZATION?
YES/NO
IF NO PLEASE STATE REASONS
CIONATURE O DATE
SIGNATURE & DATE
OFFICIAL STAMP (OPTIONAL)