

## CANDIDATE REFERENCES FORM

**Worker Name** (Required): Aaron Korver

**Reference Name** (Required): Todd Ross

Title (Optional)

**Company Name** (Required): Farm Bureau Financial

**Phone Number** (Required include area code): 515-226-6637

E-mail address (Optional):

**Professional Relationship:** (Optional)

☐ Peer

☒ Co-Worker

☒ Supervisor

☐ Customer

☐ End-User

☐ Subordinate

**Reference Name** (Required): Daniel Shaefer

Title (Optional)

**Company Name** (Required): Rain and Hail Insurance

**Phone Number** (Required include area code): 515-559-1390

E-mail address (Optional):

**Professional Relationship:** (Optional)

☒ Peer

☒ Co-Worker (former)

☐ Supervisor

☐ Customer

☐ End-User

☐ Subordinate

**Reference Name** (Required): Brad Kiewel

Title (Optional)

**Company Name** (Required): Farm Bureau Financial

**Phone Number** (Required include area code): 515-778-3914

E-mail address (Optional):

**Professional Relationship:** (Optional)

☒ Peer

☒ Co-Worker

☐ Supervisor

☐ Customer

☐ End-User

☐ Subordinate

**Reference Name** (Required): Andrew Johnson

Title (Optional)

**Company Name** (Required): Farm Bureau Financial

**Phone Number** (Required include area code): 515-710-8414

E-mail address (Optional):

**Professional Relationship:** (Optional)

☒ Peer

☒ Co-Worker

☐ Supervisor

☐ Customer

☐ End-User

☐ Subordinate