

62C London Road, Oadby Leicester LE2 5DH

Telephone: 0116 365

0747

Hello

## POST: HEALTHCARE ASSISTANT

EMMANUEL CHUKWUEBUKA NWEKE has applied for the post with ourselves and has provided your name as suitable person to provide a clinical reference. Please find attached a copy of a reference request form.

Please complete the reference and return to the above address as soon as possible.

Alternately you can fax it to 0116 2557711 or Email: compliance@topworkforce.co.uk

Please note that we may contact you upon receipt of your completed reference for further information. You are welcome to contact me on 0116 365 0747 if you have any queries regarding this reference request.

Thank you in anticipation of your prompt assistance.

Yours sincerely.

Top Workforce Team



## REFERENCE REQUEST: CLINICAL AND EMPLOYMENT

NAME OF CAN	DIDATE: EMMANUEL CHUKWU	EBUKA NWEKE
POSITION APP	LIED: Healthcare Assistant	NHS BAND:
Date in your Employment	FROM: DD/MM/YYYY 10/11/2019	TO: DD/MM/YYYY 18/12/2021
How Long Have And In What C	e You Known The Applicant apacity?	2 years, Assistant Manager.

Professional Skills & Experience	poor	Satisfactory	Good	Excellent.	Unable to Comment	Further Comments
Clinical Skills				レ		
Clinical Knowledge			~			
Organisational Skills			~			
Management Skills	W 10 T			V		

Attitude to Work and Training	poor	Satisfactory	Good	Excellent	Unable to Comment	Further Comments
Willingness To Learn			٧			
Contribution to the department				V		
Punctuality			V	7.		
Reliability				~		
Self Motivation				~		



Personality and Attitude To Others	poor	Sati	Good	Exc	Cor	Further Comments
Others		Satisfactory	bd	Excellent	Unable to Comment	Comments
	*******					
Ability to Cope Under Pressure			V			
Honesty / Integrity				V		
Communication and Team Work			200.53			

Disciplinary Record	Please give details of any disciplinary action in the last two years				
	Nil				
Sickness /Attendance Record	Please confirm the applicant sickness record in the last two years.				
	NiL				
Safeguarding Adults and Children	Do you have any reservations regarding this person working with children, young people or vulnerable adult? If so please give details of your concerns				
	Nil				

Additional Information	Based on your observations of the strengths and weaknesses of this candidate, please give any other information relevant to the position applied for.
Y-set	He has excellent interpersonal skills and extremely patient and resilient.



Please confirm whether you would re-employ this candidate YES/NO

If No Please Give Reasons



## IMPORTANT

Pease apply your company stamp in the place provided. Alternatively please enclose a letterhead or compliment slip when returning this reference.

## CLINICAL AND EMPLOYMENT REFERENCES

Position Assistant Manager company Broad Mecury Health Service

Address 10/14 Lugbe Avenue Abuja

Phone (landline) 07064577525 (Please note that, as part of our checking procedures, we will telephone you on receipt of this reference. We therefore require a landline telephone number.) Please return this reference to: The Manager, Top Workforce Recruitment, 62C London Road, Oadby, Leicester, LE2 5DH Tel: 0116 2557711 Email: info@topworkforce.co.uk