

Referee Details  Request

**References should cover a minimum of 3 years employment (to present) - and/or training, including any gaps in service.** Please give the names, contact number and email address of suitable referees (i.e. line manager or HR representative) during this period. If you were self-employed or unemployed during this time, please refer to the detailed guidance at the foot of this form.

**Please note: Practice Plus Group cannot accept any references from family members.**

**Please ensure you speak to your referees first to ensure they are happy to provide you with a reference.**

Referee 1

Your current or most recent employer



|  |  |  |  |
| --- | --- | --- | --- |
| Name of Organisation: |  | | |
| Your position held: |  | | |
| Start date: |  | End date: |  |
| I give Practice Plus Group permission to contact the below named for an employment reference: | | | |
| Line Manager Name: |  | | |
| Line Manager Position: |  | | |
| Telephone Number(s): |  | | |
| Email Address: |  | | |

Referee 2

Previous employer



|  |  |  |  |
| --- | --- | --- | --- |
| Name of Organisation: |  | | |
| Your position held: |  | | |
| Start date: |  | End date: |  |
| I give Practice Plus Group permission to contact the below named for an employment reference: | | | |
| Line Manager Name: |  | | |
| Line Manager Position: |  | | |
| Telephone Number(s): |  | | |
| Email Address: |  | | |

Referee 3

Previous employer



|  |  |  |  |
| --- | --- | --- | --- |
| Name of Organisation: |  | | |
| Your position held: |  | | |
| Start date: |  | End date: |  |
| I give Practice Plus Group permission to contact the below named for an employment reference: | | | |
| Line Manager Name: |  | | |
| Line Manager Position: |  | | |
| Telephone Number(s): |  | | |
| Email Address: |  | | |

Referee 4

Previous employer



|  |  |  |  |
| --- | --- | --- | --- |
| Name of Organisation: |  | | |
| Your position held: |  | | |
| Start date: |  | End date: |  |
| I give Practice Plus Group permission to contact the below named for an employment reference: | | | |
| Line Manager Name: |  | | |
| Line Manager Position: |  | | |
| Telephone Number(s): |  | | |
| Email Address: |  | | |

Please continue on a separate sheet if necessary.

Further guidance for providing referee details

Please refer to the below sections if you have any gaps in your employment/training record in the past 3 years and provide the listed documentation to the Post Offer Administration team:

“I have been out of work”

* A personal statement explaining your unemployment status
* Two personal references from a person of standing in your community e.g. a GP or Lawyer. Both must have known you for at least 3 years.

“I have been in full-time education”

* Reference(s) from the relevant academic institution
* In addition, one personal reference from a person of some standing in your community. They must have known you for at least 3 years.

“I have been self-employed”

* Evidence to confirm the dates of your self-employment and that your business was properly conducted e.g. from HMRC or your accountant
* In addition, one personal reference from a person of some standing in your community. They must have known you for at least 3 years.

“I have worked overseas”

* Proof of overseas residency e.g. document from a landlord
* Overseas employer references or academic references/certificates
* Proof of your itinerary
* Confirmation of your travel from UK departments and agencies overseas e.g. FCO missions, British Council, Non-Government organisations and agencies

“My situation is not covered here”

If you are still unsure as to what details you should provide for your reference checks, please contact the member of the Post Offer Administration Team who issued your Offer email. Alternatively please email the relevant Post Offer Administration mail box:

**Primary Care** (including 111, Out of Hours, Health in Justice and Practices): [PostOfferAdmin.PrimaryCare@practiceplusgroup.com](mailto:PostOfferAdmin.PrimaryCare@practiceplusgroup.com)