



AUTHORIZATION for REFERENCE VERIFICATION

I hereby authorize The City Bank Limited and its representative to verify my below 2 references and to conduct enquiries as may be necessary, this enquiry to disclose it to The City Bank Limited or its representative. I release all persons from liability on account of such disclosure.

Guideline:

- **For Experienced Employee:** Referees should not be within relatives and non-professional.
 - ✓ One reference must be from last organization.
 - ✓ Other from any professional or educational background.
- **For Fresh Employee:**
 - ✓ One reference must be from last completed educational institution
 - ✓ Other from any non-relative professional background.

(Please fill up in "ENGLISH CAPITAL" letters)

Reference 1	
Name	
Position/Designation	
Division/Department	
Organization Name	
Address	
Phone Number	
E-mail Address	

Reference 2	
Name	
Position/Designation	
Division/Department	
Organization Name	
Address	
Phone Number	
E-mail Address	

Declaration: I certify that the information stated above by me are true, complete, and correct to the best of my knowledge and belief. I understand that any false statements or any required information withheld from this form may provide grounds for the rejection of the employment offer or separation from employment.

Signature with date

Name

ID