



Employment Reference Verification Form

New Employee Name: _____

References Checked By: _____

1. Contact Name _____

Company _____ Phone Number _____

Dates Worked _____ Job Title _____

Supervisor _____ Co-Worker _____ Eligible for Rehire? _____

Comments _____

2. Contact Name _____

Company _____ Phone Number _____

Dates Worked _____ Job Title _____

Supervisor _____ Co-Worker _____ Eligible for Rehire? _____

Comments _____

3. Contact Name _____

Company _____ Phone Number _____

Dates Worked _____ Job Title _____

Supervisor _____ Co-Worker _____ Eligible for Rehire? _____

Comments _____
