



The NHHEAF Network Organizations
 Granite State Management & Resources
 4 Barrell Court, PO Box 2087
 Concord, NH 03302-2087

EMPLOYMENT REFERENCES / RELEASE FORM:

Please provide the names of four business references who are present or past supervisors.

<p>Reference Information</p> <p>Name: _____</p> <p>Telephone: _____</p> <p>Email: _____</p> <p>Company: _____</p> <p>Supervised Me: <input type="checkbox"/> yes <input type="checkbox"/> no</p>	<p>Reference Information</p> <p>Name: _____</p> <p>Telephone: _____</p> <p>Email: _____</p> <p>Company: _____</p> <p>Supervised Me: <input type="checkbox"/> yes <input type="checkbox"/> no</p>
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yes no In addition to the above references, I authorize Granite State Management & Resources, or a third-party servicer obtained by Granite State Management & Resources, to contact any **former** employer to obtain any data necessary to support this application.

yes no In addition to the above references, I authorize Granite State Management & Resources, or a third-party servicer obtained by Granite State Management & Resources, to contact any **current** employer to obtain any data necessary to support this application.

I authorize my current and/or previous employers to furnish Granite State Management & Resources, or a third-party servicer obtained by Granite State Management & Resources, the information requested in the reference check. I further agree to release my current and/or previous employers, officers, agents and employees from any liability from damage caused by giving and receiving information or opinions as to my employment or character.

Signature of Applicant: _____

Date: _____

Name of Applicant (Printed): _____

Please list any other name(s) by which you may have been known to references:

Granite State Management & Resources is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, religion, color, national origin, sex, age, status as a protected veteran, among other things, or status as a qualified individual with a disability. This organization participates in E-Verify.