



Reference Check

Applicant name: \_\_\_\_\_

<b>1.) Name of reference :</b>
Address:
City: _____ State: _____ Zip: _____
Phone:
Email:
Is reference: <input type="checkbox"/> Personal <input type="checkbox"/> Previous/Current Employer <input type="checkbox"/> Previous/Current Co-Worker
Please list where you know the reference from and how long you have known them: Location: _____ Length of time: _____
<b>2.) Name of reference :</b>
Address:
City: _____ State: _____ Zip: _____
Phone:
Email:
Is reference: <input type="checkbox"/> Personal <input type="checkbox"/> Previous/Current Employer <input type="checkbox"/> Previous/Current Co-Worker
Please list where you know the reference from and how long you have known them: Location: _____ Length of time: _____
<b>3.) Name of reference :</b>
Address:
City: _____ State: _____ Zip: _____
Phone:
Email:
Is reference: <input type="checkbox"/> Personal <input type="checkbox"/> Previous/Current Employer <input type="checkbox"/> Previous/Current Co-Worker
Please list where you know the reference from and how long you have known them: Location: _____ Length of time: _____

*I hereby authorize Washington Odd Fellows Home to contact the references I have listed above. I understand that this is in accordance with all applicable Federal and State Laws.*

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_