

Candidate Referral Form

Job Title: _____ Job Requisition #: _____

Candidate's Name: _____ Referral Date: _____

Referring Employee's Name: _____

Work Phone: _____ Work E-mail: _____

I have read and understand the referral program rules.

Referring Employee's Signature

Date

Attach the candidate's resume or application and submit this form to Human Resources.

INTERNAL USE ONLY:

To: Payroll

From: Human Resources

Charge To:

Target Date for award payment: _____ (after 90 days of hire date below)

Referred candidate's hire date: _____

Reply Reply all Forward