



16654 Soledad Canyon Rd. Suite 419 Canyon Country, CA 91387
 Phone: (888) 640- 7111 Fax: (661) 309-9073

PROFESSIONAL REFERENCE

DATE: _____

EMPLOYEE NAME: _____ EMPLOYEE SIGNATURE: _____

CLASSIFICATION: _____

Dear employer, the above named EMPLOYEE has applied for a position with MayDay Staffing Solutions. If you would please provide the information as indicated below it would be much appreciated. This information will be held in strict confidence. Once completed, please fax back to 661-309-9073. Thank you for your time and consideration!

FACILITY:

ADDRESS:

PHONE NUMBER:

EMPLOYMENT DATES:

UNIT & SHIFT WORKED:

REFERENCES NAME:

REFERENCES TITLE:

I, the above signed, do hereby give consent for the below reference check including a fax trasmission to MayDay Staffing Solutions. I acknowledge by my signature above that my understanding of this information will be held in strict confidence and used only as a screening tool for MayDay Staffing Solutions. I hereby release any and all liability by and for all parties participating in the supply of this information.

PLEASE EVALUATE	BELOW STANDARDS = 1	SATISFACTORY = 2	ABOVE EXPECTATIONS = 3	EXCELLENT = 4
ATTITUDE				
ATTENDANCE & RELIABILITY				
TEAM PLAYER				
COMMUNICATION				
RESPONSIBILITY				
PROFESSIONALISM				
CRITICAL THINKING				
APPEARANCE				

Are they eligible for re-hire? _____ IF NO, PLEASE EXPLAIN:
 ADDITIONAL COMMENTS: _____

Reference Signature: _____

DATE: _____

MayDay Staffing Signature: _____

DATE: _____