

Referral Staffing

...Where **NOTHING** Beats a Referral!

APPLICATION FOR EMPLOYMENT

We appreciate your interest in working with Referral Staffing. We look forward to assisting you in finding the right opportunity! Please help us by completing the application below.

(All information will remain confidential and used only by the Referral Staffing Team.)

Referral Staffing considers all applicants for all positions without regard to race, color, sex, national origin, age, marital status, veteran status, or the presence of a non-job related medical condition or disability or any other legally protected status. Referral Staffing complies with the law regarding reasonable accommodations for disabled employees.

NAME: _____

If hired, can you submit verification of your identity and eligibility to work in the US? Yes No

Have you ever applied to, or worked for, Referral Staffing? No Yes (Whom? _____)

EMPLOYMENT DESIRED

Seeking employment in (Check all that apply): Consulting Temporary Permanent

Desired Position: _____ Date Available: _____

Current Salary: _____ Desired Salary: _____

Desired Industry: _____ Referred By: _____

E-mail Address: _____ Emergency Contact Name: _____

Cell #: _____ Emergency Contact #: _____

Home #: _____ Highest Degree Attained: _____

Are you willing to relocate? Yes No

Preferred Work Locations: _____

Would you like to participate in our \$500 Referral Bonus Program? Yes No [Learn More](#)

CLIENT'S STATEMENT

Have you been convicted of a felony within the last 10 years that has not been expunged or sealed by a court?
Yes No *(Conviction will not necessarily disqualify applicant from employment.)*

If yes, please explain. _____

I certify that the answers given are true and complete to the best of my knowledge. I understand that the statements made in this application process may be certified and that a reference, criminal or other appropriate investigation may be conducted. I hereby authorize Referral Staffing to contact the listed references on my behalf and to verify my education and professional credentials and to share this information with its client companies. I further understand that misrepresentation made by me in this application shall be considered as sufficient cause for termination of my relationship with Referral Staffing and I will be liable for any damages caused by giving false information.

Signature of Applicant: _____ Date: _____

Referral Staffing

...Where NOTHING Beats a Referral!

CLIENT'S REFERENCE INFORMATION

Please complete the following reference form in detail, where applicable.

NAME: _____

REFERRAL STAFFING REPRESENTATIVE: _____

RELATIONSHIP	REFERENCE NAME	TITLE	COMPANY	PHONE NUMBER	CAN WE CONTACT THIS PERSON?	
Current Supervisor					Yes	No
Former Supervisor					Yes	No
Peer					Yes	No
Peer					Yes	No
Subordinate					Yes	No
Subordinate					Yes	No