

Employer Reference Authorization Form

**ADVANCED HOME CARE SERVICES, LLC**  
260 Cochituate Rd, Suite 201 Framingham, MA 01701

To: \_\_\_\_\_

Date: \_\_\_\_\_

Tel: \_\_\_\_\_

I have applied for employment with Advanced Home Care Services LLC. I hereby authorize the release of all information pertaining to my employment. Your prompt reply will be greatly appreciated.

Thank you for your assistance.

\_\_\_\_\_  
(Signature)

\_\_\_\_\_ has applied for a position as a \_\_\_\_\_  
and has given your name as a reference.

We would appreciate you completing this form and returning it to us at your earliest convenience. Please be assured that any information given us will be held in strictest confidence.

Sincerely,

Human Resource Assistant

<b>EVALUATION</b>	<b>EXCELLENT</b>	<b>GOOD</b>	<b>FAIR</b>	<b>POOR</b>
Reliability/ Dependability				
Honesty/Stability				
Quality of Work				
Attendance/ Punctuality				
Ability to Work With Others				
Ability to work on His/Her own				

Organization Name: \_\_\_\_\_

Position Held: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Would you rehire the applicant? \_\_\_\_\_ If no, why not? \_\_\_\_\_

Employment Dates: \_\_\_\_\_

Would you recommend the applicant for this position? \_\_\_\_\_

\_\_\_\_\_  
(Signature)