

Personal 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 the Advanced Home Care Services LLC. I hereby authorize the release of all information. 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 personal 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,

Dear

<b>EVALUATION</b>	<b>EXCELLENT</b>	<b>GOOD</b>	<b>FAIR</b>	<b>POOR</b>
Reliability/ Dependability				
Honesty				
Stability/ Evenness of Mood				
Ability to get Along with people				
Housekeeping Skills				

How long have you known the applicant? \_\_\_\_\_

In what capacity have you known the applicant? \_\_\_\_\_

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

\_\_\_\_\_

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