

EMPLOYMENT REFERENCE			
To be completed by the applicant's direct supervisor or line manager within the employing organisation			
Name of Applicant			
Date of Birth	DD/MM/YY		
Supervision Dates	From: DD/MM/YY	To: DD/MM/YY	
Applicant's current/most recent job title & grade			Status: (please circle) Regular / Volunteer
What were the applicant's main tasks and responsibilities?			
What are the applicant's strengths in the workplace?			
What other comments would you like to make in relation to the applicant's skills, experience, performance, conduct, etc.?			
Reason for leaving (if known)			
Is the applicant currently under investigation for any matter (incl. conduct, capability or performance) under any of your employment policies?	(Please tick) <b>Yes</b>	(Please tick) <b>No</b>	
If yes, please provide details:			
The answers given above have been provided in good faith and are correct to the best of my knowledge and belief.			
Referee Name (please write in capitals):			PRC/Reg Licence No.
Job Title:			
Hospital/Organisation Name			
Signature:			Date: DD/MM/YY
Email address:	Phone No.		
<b>NB: Please provide work email address and contact number where possible. If your organisation does not provide work email addresses or direct line numbers please provide best contact details and sign declaration below.</b>			
<b>I confirm that my employing organisation does not provide work email address or direct contact number. I have provided best contact details above.</b>			
Signed: <span style="border: 1px solid black; display: inline-block; width: 200px; height: 20px; vertical-align: middle;"></span>			
<b>Declaration Statement:</b> <i>I hereby certify that the information I have given is true, correct and complete. I understand that failure to answer any question or giving false answer can be detrimental to my cause/application and/or can be penalized in accordance with the law.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Data Privacy Policy and Consent:</b> <i>I voluntarily and freely consent to the collection and sharing of the above information in relation to the company's Privacy Policy and the Data Privacy Act of 2012.</i> <input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Note:</b> We believe that protecting our customer's data privacy is essential. View our privacy practices here: <a href="http://www.ascglobalrecruitment.com/wp-content/uploads/2019/03/ASC-Data-Privacy-Notice.pdf">http://www.ascglobalrecruitment.com/wp-content/uploads/2019/03/ASC-Data-Privacy-Notice.pdf</a> <i>"Your feedback is highly important to us. For enquiries regarding the quality of our services, you may send it through feedback@ascglobalrecruitment.com. Rest assured that this will be treated with the utmost confidentiality."</i>			
<b>THANK YOU FOR TAKING THE TIME TO COMPLETE THIS REFERENCE FORM. PLEASE ENSURE YOUR OFFICIAL DRY SEAL OR STAMP IS ADDED WHERE INDICATED. IF YOU ARE UNABLE TO PROVIDE THIS FOR ANY REASON, PLEASE ADD A WRITTEN NOTE TO THIS EFFECT IN THE BOX PROVIDED, TOGETHER WITH YOUR SIGNATURE.</b>		Please add dry seal/stamp here. If not available, please write short explanation and sign.	
<b>I understand that ASC Global Recruitment will contact me by phone to conduct a reference verification. If I am not available, I hereby authorise the following colleague to provide the verification on my behalf.</b> <b>ASCF22 1 10272021</b>		Name:	
		Job Title:	
		Phone No:	