Reference Release Form

Applicant Name:	
Former Employer:	
Social Security #:	Dates Employed:
Inc. and has listed your organization a	considered for employment with Winning Wheels as a former employer. We would appreciate your mat your earliest convenience. Information
Please fax or email this form to us: Attn. Amie Topp, fax 815-537-5268, 6 Thank you for your assistance.	email atopp@aheinc.biz
I consent to and authorize the above employers, to furnish any reference in wage history, performance, attendance reason for separation of employment employer. It is expressly understood purpose of determining my acceptable above named former employer, and indamages or claims, including but not prospective economic advantage and	named former employer, and its agents and information concerning me, including achievement, ce, personal history, disciplinary information, and relating to my employment with the former that any information given is to be used for the lity for employment. I also hereby release the its agents and employees from all liability for limited to defamation, interference with contract or in egligence. I have or may have which arise or provided pursuant to this authorization or any on.
Applicant's Signature	Date

Record of Employment

Applicant Name		
Dates employed:	Position:	
Wages at time of separation:		
Eligible for Rehire: Y N No Com	ment	
Did the employee give a 2 week not	ice? N Y No Comment	
Attendance/Tardy Issues? Y N	No Comment	
Would the applicant pose a risk (abu	use, neglect, theft) to employees or r	esidents?
Y N No Comment		
General Comments on Performance	e etc.:	
This form was completed by:		
Print	Sign	Date