



## REFERENCE CONTACT INFORMATION (Please bring completed form to interview)

Are you a current or former State of Delaware employee?  Yes  No  
If yes, please indicate current/former agency: \_\_\_\_\_

Please provide contact information for three professional sources that may be contacted by the State of Delaware to conduct employment references. **At least 1 reference must be supervisory level or higher**, but preference is for 3 supervisory level references. Do not list names of personal friends or family members. If you are a current or former State of Delaware employee, an interagency reference check will be requested on your behalf.

### Reference Contact #1

Name \_\_\_\_\_ Title \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Address \_\_\_\_\_

Business Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Relationship to Reference \_\_\_\_\_

### Reference Contact #2

Name \_\_\_\_\_ Title \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Address \_\_\_\_\_

Business Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Relationship to Reference \_\_\_\_\_

### Reference Contact #3

Name \_\_\_\_\_ Title \_\_\_\_\_

Company/Organization Name: \_\_\_\_\_

Address \_\_\_\_\_

Business Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Relationship to Reference \_\_\_\_\_

**Applicant's Printed Name** \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_