

Economic Opportunity Council of Suffolk, Inc.

PERSONAL CHARACTER REFERENCE FORM Employment Contingent upon *Completion* of Reference Check

The applicant below would like to be accepted by **Economic Opportunity Council of Suffolk, Inc.** for the purpose of being employed. You will be contacted by our EOC of Suffolk, Inc. to confirm this reference.

Name of Applicant:			
Position applied for:		Interviewed by:	

Reference Information:

1. **Name of Reference:** _____

2. **Day Time Telephone:** _____ 3. **Evening Time Telephone:** _____

4. **Address:** _____

I confirm that The Information Below Is True and Correct.

Signature of The Referee: _____

5. How long have you known the applicant: _____

6. How do you know the applicant? (Example: employer, neighbor, friend, etc.) _____

7. Please check the most appropriate box regarding applicants abilities:

ABILITIES:	Excellent	Very Good	Good	Poor	Don't Know
Communication Skills					
Work Quality					
Attitude					
Reliability					
Maturity					
Helpfulness					
Ability to work with others					

8. Please describe why you think the applicant would be suitable for the program: _____

Please return ASAP as this is needed for employment.

Please fax 631-289-2538 or email amaddux@eoc-suffolk.com if easier to submit. Thank you for your time.

OFFICE USE: SENT TO DIRECTOR:

DATE RECEIVED:
VERIFIED BY:

7-19am

E-mail us at: eoc@eoc-suffolk.com or visit our website at: eoc-suffolk.com

BOARD OF DIRECTORS: Chairperson – Sondra Palmer Randall; Vice Chairperson – Frederick Combs; Treasurer – Jerome Linder
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