

Bloomsburg University of Pennsylvania

Bloomsburg, Pennsylvania 17815

REFERENCE AUTHORIZATION FORM

As a matter of policy, Bloomsburg University conducts identification, employment and character verifications on final candidates selected for employment.

Please provide the names, phone numbers, address, and email address of at least three professional references who are familiar with your work. **One of your references must be a current or recent supervisor.**

Bloomsburg University is hereby authorized to contact the named persons below for identification, employment, and character references.

1. Current or Recent Supervisor Name:		Phone:	
Address:		Email address:	
<input type="checkbox"/> Current Supervisor		<input type="checkbox"/> Recent Supervisor	
2. Name:		Phone:	
Address:		Email address:	
<input type="checkbox"/> Supervisor	<input type="checkbox"/> Colleague	<input type="checkbox"/> Other (describe)	
3. Name:		Phone:	
Address:		Email address:	
<input type="checkbox"/> Supervisor	<input type="checkbox"/> Colleague	<input type="checkbox"/> Other (describe)	
4. Name:		Phone:	
Address:		Email address:	
<input type="checkbox"/> Supervisor	<input type="checkbox"/> Colleague	<input type="checkbox"/> Other (describe)	
5. Name:		Phone:	
Address:		Email address:	
<input type="checkbox"/> Supervisor	<input type="checkbox"/> Colleague	<input type="checkbox"/> Other (describe)	

Signature

Print Name

Date