

Niche Associates, Inc.
Permission to Conduct a Reference Check

By signing this document, I authorize Niche Associates, Inc. to conduct a reference check to seek and verify specific information about my background, capabilities, prior work experience, and prior work performance.

I understand that this authorization will apply not only while I am under consideration for employment. It will continue to apply after I become a Niche Associates employee or contractor.

I understand that a Niche Associates representative might ask former employers and any other references that I provide for information such as, but not limited to, the following:

1. Duration of work (start and end date)
2. Starting and ending salary
3. Starting and ending jobs (verification that I held the jobs & titles I claim to have held)
4. Verification that I managed or worked on the projects I claimed on my resume and in interviews
5. Verification that I performed the duties/specific work that I claimed on my resume and in interviews
6. My knowledge / competence level in the work (both in general and in specific areas)
7. My ability to interact in a positive way with coworkers and with people in my personal life
8. My ability to work well in a group
9. My ability to work under pressure
10. My work ethic / dependability
11. My organizational skills
12. Other strengths and weaknesses
13. If I am eligible for rehire
14. Any additional comments the a reference would like to make about me

By signing below, I grant Niche Associates permission to solicit information. Furthermore, I grant all contacted references permission to divulge the information solicited.

I understand that the information obtained may be used by Niche Associates, in its sole discretion, and without liability, to determine eligibility for initial or continued employment. I am willing that a photocopy of this authorization form be accepted as having the same authority as the original. I specifically waive the need for any written notice from any employer or other contacted reference that may provide information based on this authorization.

Applicant Signature: _____

Position held or under consideration: _____

Current Address: _____

Next Previous Address: _____

Please provide four professional references. Three must be former direct supervisors or managers and you must provide your current or last direct supervisor or manager. Please do not provide co-workers /peers.

Name, phone number, email address, relationship

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