

References

I, _____, hereby authorize **PRG Insurance Staffing**, or its designated agent to thoroughly investigate all of the information contained in this form and/or resume, and to contact any or all of my prior employers and personal references to verify my employment. I agree to hold **PRG Insurance Staffing**, or its designated agent harmless from any and all liability for employment related actions taken on the basis of information obtained in good faith from any source.

PLEASE LIST FOUR (4) WORK RELATED REFERENCES

Name: _____ Company: _____

Position: _____ Phone: _____

Name: _____ Company: _____

Position: _____ Phone: _____

Name: _____ Company: _____

Position: _____ Phone: _____

Name: _____ Company: _____

Position: _____ Phone: _____

Date

Social Security Number

Signature

Print Name