



METRO SUPPORT SERVICES, INC.
P.O. Box 966 • Eastlake, CO • 80614-0966
Phone 720.872.2730 • Fax 720.872.2738

**Request for Business Reference
Confidential**

Section 1 to be filled out by Applicant:

This form should be completed by two references. If you do not have a work reference, please submit two personal or volunteer references. Please, no spouse, parents, children or siblings as your references.

I _____ give permission for the person below to provide a reference for me for the purpose of consideration to contract as a Host Home Provider with Metro Support Services, Inc.

Applicant Signature: _____ Date: _____

Section 2 to be filled out by Reference: PLEASE PRINT

Name of Contact Giving Reference: _____

Company Name & Address: _____

Dates of Employment: From _____ to _____

Job Title and Duties of Applicant: _____

Please Describe how the person works with others: _____

Eligible for rehire? Yes No

Performance: Average Good Poor

Attitude: Average Good Poor

Attendance: Average Good Poor

Reference Signature: _____ Date: _____