



EMPLOYER REFERENCE FORM

Instructions for organizations submitting a proposal to WorkForce Central: Please use this form to obtain references from two (2) employers/businesses who are directly involved with your training programs, preferably employers involved in the training proposed for funding. After filling in the name of your organization below, please send the form to employers to complete, sign, and return to you. Two (2) Employer Reference Forms must be included as part of your PDF proposal package.

Organization Requesting Reference:

Instructions for employers/businesses completing the Reference Form: Please answer questions as they relate to your involvement in training program(s) provided by the organization requesting this reference, then sign and return the form to them. WorkForce Central may contact you to verify that you completed this Reference Form. *Thank you very much for sharing this information.*

Name of Person Completing Reference Form:

Business Name, City & State:

Phone Number & Email Address:

- A. Please state the training program(s) provided by this organization that you are involved in, and how long you have worked with the organization on this or other training programs.**

- B. Please briefly describe how you are involved in the organization's training program(s).**

- C. Does your work with this organization's training program(s) benefit your business? If yes, how?**

- D. Do you recommend this organization for a training contract from WorkForce Central?**

Yes No

If yes, please list up to five reasons that help explain your recommendation:

- 1)
- 2)
- 3)
- 4)
- 5)

E. Is there anything else you believe we should know about working with this organization?



SIGNATURE

DATE