

Professional Reference Form

REFERENCE CODE 0RHYQFjqoe5SLV6HwQHbmvC3dZeowYr-18-4-5	DATE COMPLETED 29/07/2025
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Candidate Details

NAME Zahid Hasan	PROFESSIONAL TITLE Registered Nurse
POSITION N/A	CANDIDATE REFERENCE AB1234

Referee Details

FULL NAME Dr. Jane Smith	JOB TITLE Ward Manager
EMAIL jane.smith@hospital.org	PHONE +44 7700 900123
RELATIONSHIP TO CANDIDATE Line Manager	

Performance Assessment

Recommendation Questions

Employment Suitability	
IS THE CANDIDATE HONEST AND ACCURATE? Yes	IS THE CANDIDATE FIT FOR EMPLOYMENT? Yes

The candidate has always demonstrated honesty and integrity.

Highly recommended for employment in any healthcare setting.

Professional Assessment

SUITABLE FOR CLINICAL ENVIRONMENT?

Yes

Performs exceptionally well in high-pressure clinical environments.

ANY DISCIPLINARY ACTION?

No

SUITABLE FOR THE POSITION?

Yes

Would be an asset to any nursing team.

WOULD YOU RE-EMPLOY?

Yes

Would definitely re-employ without hesitation.

Additional Information

ADDITIONAL INFORMATION

The candidate has shown exceptional leadership potential and has mentored junior staff effectively.

Declaration

I, **Dr. Jane Smith**, declare that the information provided in this reference is true and accurate.



Digital signature provided.

Date: 29/07/2025