

Professional Reference Form

REFERENCE CODE

ORHYQFjoe5SLV6HwQHaBmvC3dZeowYr-18-4-5

DATE COMPLETED

29/07/2025

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