OLIGNY & THIBODEAU
INQUIRY SERVICES • COLLECTIONS AGENCY

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EMPLOYMENT REFERENCE FORM

Transmission of this form implies acceptance of the conditions written below.

Date: _____

A – Bill to: *(write clearly please)*

Name: (company or individual)	
Phone:	Fax:
Address: (street, city, province, postal code)	
Contact person:	Position applied for:
Email:	

B – Candidate *(write clearly please)*

Name:	First name:	
Address: (street, city, province, postal code)		Phone:
Date of birth: (obligatory) (DD, MM, YYYY)	SIN: (optional) - -	
Name of present owner:	Owner's phone number:	

C – Employer reference or client *(actual or previous)*

(1) Employer or client:			
Name of supervisor:		Phone:	
Address: (street, city, province, postal code)			
Type of job:	Start:	End:	Net monthly salary:
(2) Employer or client:			
Name of supervisor:		Phone:	
Address: (street, city, province, postal code)			
Type of job:	Start:	End:	Net monthly salary:
(3) Employer or client:			
Name of supervisor:		Phone:	
Address: (street, city, province, postal code)			
Type of job:	Start:	End:	Net monthly salary:

The candidate has authorized Oligny-Thibodeau Inquiry Services Inc. as well as the client mentioned above to obtain all the necessary information regarding his employer, credit bureau, legal record or other sources that establishes his decision to hire. He also authorizes them to contact and inquire about all credit experiences with lenders, the credit bureau and all other service providers for the entire duration of the contract with the client mentioned above. He solenmly affirms accordance with the provisions of the Evidence Act, that all identified information in section B and C of the present form are truthful, especially his name, first name, address and his date of birth. He understands that any false declaration is liable of legal sanctions. The candidate could consult and correct the report if neccessary. The client and his agent are responsible of verifying the identity of the potential candidate, especially the name, first name, date of birth and address, by verifying official pieces of identification therefore, they have declared to have verified the information before submitting the report, and in this respect, the client renounces all recourse against the Oligny-Thibodeau Inquiry Services Inc. for any and all damages including, deriving from an erroneous conclusion, ensuing that the client didn't correctly verify the identification of the potential candidate. Furthermore, the client is conscious that the final decision for to accept the candidate is exclusively their's to make, and that the Oligny-Thibodeau Inquiry Services Inc. cannot be held responsible in any way for damages caused to the client. The result of the inquiry does not exclude doubt and cannot be guaranteed.

Inquiries are PAYABLE IN ADVANCE. Please provide the numbers, the expiry date and the 3 security numbers of your Visa or Mastercard card by email at info@oligny-thibodeau.com or by calling 514 856-7723.

Client signature **OBLIGATORY**

Candidate signature **OBLIGATORY**