

**NETTCP
Reference Form**

This is a reference form for: _____
(Applicant's Name)

Reference Name: _____

Position/Title: _____

Address: _____

Phone: _____

Email: _____

How long have you known the applicant and in what capacity? _____

Please rate the applicant in the following areas (check the appropriate box):

	Unable to Judge	Below Average	Average Upper 50%	Upper 20%	Upper 10%	Upper 5%
Academic Ability						
Initiative and Motivation						
Interpersonal Skills						
Interest in construction materials						

Please provide additional comments on the applicant (you may include a separate letter if you prefer):

(Reference's Signature)

(Date)

Please return the completed form (with letter, if appropriate) to the applicant in a signed, sealed envelope, or you may send it directly to:

NETTCP
P.O. Box 419
Winchendon, MA 01475
800-338-5355 - (office) 978-248-0394
Email: info@nettcp.com