



## Employee Referral Form

1. To refer a potential employee, please complete this form and return it to the Human Resource department at [info@diamondrehabhhs.com](mailto:info@diamondrehabhhs.com)
2. You are eligible for a referral award only when you refer external candidates.
3. If the candidate you refer is hired and completes one full patient episode, you will receive a referral award of \$50.
4. Employees involved in the hiring decision for a particular position are not eligible for referral awards for that position.
5. Only one referral award can be given per candidate. If a candidate is referred by more than one employee, the first referral received will be the one rewarded if the candidate is hired.

Employee Name: E-Mail Address:

### Employee Information

Employee Name \_\_\_\_\_

Email Address \_\_\_\_\_

Telephone No \_\_\_\_\_

### Referral Information

Candidate Name \_\_\_\_\_

Email \_\_\_\_\_

Position Referred \_\_\_\_\_