

Janine M. Marks, Executive Director

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| Date: | | | |
|-----------------------------------|--------------------------------|------------|-----------|
| To Whom It May Concern: | | | |
| I | _give permission for you | | to answer |
| the following questions regarding | my past employment at your org | anization. | |
| Employee signature | | date | |
| Dates of employment | | | |
| Position held | | | |
| Would you rehire | | | |
| Additionalcomments: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Signature | | date | |