CAL POLY
CORPORATION

CANDIDATE REFERRAL FORM

Job Posting Title: _____

Department Position Reports To: _____

Candidate's Name: _____ _____
First Name Last Name

Referral Date: _____

Referring Employee's Name: _____ _____
First Name Last Name

I have read and understand the referral program rules.

_____ _____
Referring Employee's Signature Date

***Please submit this form to the Cal Poly Corporations Human Resources Department, Building 15 or email Jennifer Wharton at jlwharto@calpoly.edu.**