



EMPLOYEE REFERRAL AWARD PROGRAM (ERAP)
(RECEIVE UP TO \$2000 BONUS*)

Submittal Form

Name of Candidate: _____ Date: _____

Address: _____

City, State, Zip Code: _____

Phone Number Where They Can Be Reached: _____

Email Address: _____ Qualifications: _____

Where Did You Meet The Candidate? _____

List Primary Technical Skills: _____

List Secondary Technical Skills: _____

Date Available For Employment? _____

I certify that I have contacted the above-named candidate and shared information with him/her regarding ABSI employment opportunities as well as my intentions to submit the copy of his/her resume to the ABSI Recruiting Staff.

Your Signature and Date

Your Name

Your Email

Your Cell Phone Number

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- *In order for you to be considered for an ABSI employee referral award, you must submit this form with your candidate's resume.*
- *The referral bonus will be paid after 3 months of hiring date of your candidate.*
- *The bonus amount is taxable and it will be added to your yearly income (W2 or 1099).*
- *The bonus amount will be decided by ABSI Management, based on many factors. The management decision will be final and binding.*

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This is to advise you that the resume of the candidate named above has been received by the ABSI Recruiting Staff and will be considered for any openings available at the company.

Date

Name of ABSI Representative

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Date Hired: _____

Recruiter: _____

8850 Whitney Drive Lewis Center OH 43035

Phone: 614-888-2ABS

Fax: 888-699-8866

Email: info@absi-usa.com