

REFER A FRIEND TO DUKE AND EARN UP TO \$3,000

EMPLOYEE REFERRAL FORM

Help build our winning team by referring Clinical Support Staff for any of the following positions.

- | | |
|---|---|
| <input type="checkbox"/> Behavioral Health Tech | <input type="checkbox"/> Nursing Care Assistant I/II/HUC FP & Adv. FP |
| <input type="checkbox"/> LPN | <input type="checkbox"/> LPN FP |
| <input type="checkbox"/> Obstetric Tech | <input type="checkbox"/> Medical Asst. Certified |
| <input type="checkbox"/> LPN | <input type="checkbox"/> LPN FP |
| <input type="checkbox"/> Emergency Department Tech I,II,III | <input type="checkbox"/> Clin Tech I,II,III |
| <input type="checkbox"/> Cytotechnology Tech | <input type="checkbox"/> Histology Tech |
| <input type="checkbox"/> Med Lab Tech I,II | <input type="checkbox"/> Med Lab Scientist (MLS,ADV,MLS SR, MLS SPEC) |

You must be an eligible Duke Employee; the referral form must be submitted via the Refer-A-Friend Portal prior to the candidate's hire date; the referred clinical support staff must have required licensure/certification in the role for which the candidate is hired; and the referred candidate must be employed in one of our three (3) acute-care hospitals, Duke Primary Care Network, Duke PRMO, or Duke HomeCare or Hospice.

REFERRING EMPLOYEE MUST COMPLETE THIS SECTION BEFORE AN OFFER IS EXTENDED		
Name (please print)		
Date (This form is valid until April 30, 2022)		
Duke Unique ID		
Signature		
Department		
Entity	<input type="checkbox"/> DUH <input type="checkbox"/> DRH <input type="checkbox"/> DRAH <input type="checkbox"/> DHCH <input type="checkbox"/> PRMO <input type="checkbox"/> DPC	
Are you?	<input type="checkbox"/> Monthly Employee <input type="checkbox"/> Bi-weekly Employee	
Work Phone		
Home Phone		
Why did you refer this candidate to Duke Health?		
Name of referred candidate	Full Name:	Phone Number:
	Email Address:	Relationship:

Please submit questions to: referanurse@dm.duke.edu