

**First 5 LA APPLICANT REFERENCE FORM**

Name of Contractor Submitting Proposal to First 5 LA:	
Name and Title of Person Providing Reference:	Date:
Agency/Organization:	Phone:
Signature:	Email:
Description of Work Performed by Contractor Listed Above for Client Providing This Form:	
Dates of Work Performed:	

Using the Client Reference Form Instructions and Rating Scale, please rate the Contractor's Performance by **circling a number from 0 to 4** that best describes your experience working with them (attach additional comments if necessary).

Quality of Service	<b>0</b> <b>1</b> <b>2</b> <b>3</b> <b>4</b>	Comments:
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Problem Resolution	0 1 2 3 4	Comments:
Cost Control	0 1 2 3 4	Comments:
Timeliness of Performance	0 1 2 3 4	Comments:
Business Relations	0 1 2 3 4	Comments:

Customer Service	<b>0</b> <b>1</b> <b>2</b> <b>3</b> <b>4</b>	Comments:
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