

## Referral Bonus Form

To participate in the Team Member Referral Program, please complete and send this form to the Recruiting Department **before** the candidate's start date to [recruiting@saltcollective.com](mailto:recruiting@saltcollective.com). The candidate must be hired within 6 months of form submittal.

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### Referring Team Member Information

Referring Team Member Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Office Location: \_\_\_\_\_ Job Title: \_\_\_\_\_

How do you know the person? \_\_\_\_\_

What position do you think this person would be a good fit for and why? \_\_\_\_\_

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Referring Team Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Referred Candidate Information

Referred Candidate Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Position of Interest: \_\_\_\_\_ Location of Interest: \_\_\_\_\_

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This required form must be submitted to the Talent Acquisition Department. Any referral bonus award is subject to all state and federal taxes and withholdings. Refer to the Team Member Referral Program Policy for eligibility, payment and other terms.