



**Area Agency on Aging of Western Arkansas
and Visiting Nurses Agency**
"Our heart is in your home."

Referral Bonus

Employee Name:
Employee Address:
Employee Phone Number:
Employee's Position: <input type="checkbox"/> Aide <input type="checkbox"/> Driver <input type="checkbox"/> Attendant

Applicant Name:
Applicant Date of Hire:
Applicant's Position: <input type="checkbox"/> Aide <input type="checkbox"/> Driver <input type="checkbox"/> Attendant

I have read and understand the company's Bonus Referral Policy. I understand that if the applicant completes 90 days of employment with the company, I will receive my bonus within two weeks.

Employee Signature

Date