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Current date

Reference's Company Name
Street Address
City, State Zip

ATTN: Reference Contact Name

Fax: Reference's Fax Number

RE: Applicant Company Name and Address

I am currently applying for membership with the California Ambulance Association. The Ethics and Professionalism Committee of the Association require that I submit letters of reference to accompany the application.

Please complete the form below based on your experience with our organization and return to me at your earliest convenience.

Please fax back your response to (xxx) xxx-xxxx or call (xxx) xxx-xxxx with any questions:

1. How long has this firm been in operation? _____
2. In your experience, does this firm render good quality service? _____

3. Are you aware of any serious complaints against this firm regarding ethics or quality of care? _____
4. Have their professional licenses or privileges ever been suspended or revoked to your knowledge? _____

Thank you for your time, cooperation and prompt response.

Sincerely,