R&D Electronics

5501 Hwy 431 South Brownsboro, AL 35741 Tel: 256/534-6415 Fax: 256/534-6742 www.rdelect.com

APPLICATION FOR EMPLOYMENT

R & D Electronics is an equal opportunity employer

PERSONAL	INFORMATION	
Name (Last, First, Middle):		ate:
Social Security Number:		
Home Address:		
City:	State:	Zip:
Home Phone:	Business Phone:	
Can you prove your U.S. Citizenship? Circle one: Yes No)	
If not a U.S. Citizen, give Visa No. and Expiration Date:		
Are you related to anyone who currently works for R & D? Ye	s No Whom:	Relation ·
Have you ever applied for employment with us? Yes No	If yes: Date:	
Position applying for:	Salary Requirement:	
Referred by:	Date Available to start:	
If overtime is required are you available? Yes No		
EDUCAT	ION RECORD	
High School (Name, City, State):		
raduation Date: Number of years completed:		GED? Yes No
Business or Technical School (Name, City, State):		
Dates Attended:	Degree Earned:	
Undergraduate College (Name, City, State):		
Dates Attended:	Degree, Major:	
Graduate School (Name, City, State):	<u> </u>	
Dates Attended:	Degree, Subject:	
Did you serve in the U.S. Armed Forces? Yes No	1	1
If "yes", in what branch?	Years of service:	

,	ON ABOUT YOUR LAST 3 JOBS, STARTING WITH THE MOST RECENT)
1-Employer:	Dates Employed:
Address:	
City:	State: Zip:
Phone:	Ending Salary:
Title/Duties:	•
Supervisor's Name and Title:	
Reason for Leaving:	
Troubon for Loaving.	
2-Employer:	Dates Employed:
Address:	
City:	State: Zip:
Phone:	Ending Salary:
Title/Duties:	
Supervisor's Name and Title:	
Reason for Leaving:	
Treason for Leaving.	
3-Employer:	Dates Employed:
Address:	
City:	State: Zip:
Phone:	Ending Salary:
Title/Duties:	
Supervisor's Name and Title:	
Reason for Leaving:	
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BUSINESS REFERENCES (IF APPL)	YING FOR YOUR FIRST JOB, YOU MAY USE ACADEMIC REFERENCES
1-Name:	,
Work Phone:	Home Phone:
City:	State: Zip:
Years Known:	
2-Name:	
Work Phone:	Home Phone:
City:	State: Zip:
Years Known:	
3- Name:	
Work Phone:	Home Phone:
City:	State: Zip:
YEARS KNOWN ;	

PLEASE READ AND SIGN BELOW		
Will be subject to a pre-employ opportunity to voluntarily sign a	e work environment. All applicants that receive an offer of employment ment drug test. Prior to testing, the applicant shall be afforded the a Substance Use Testing Consent Form. If the applicant refuses to sign form, consideration for employment shall be withdrawn.	
Signature:	Date:	
OFFICE USE ONLY:		
Interviewed By:	Date:	
Position:	Department:	
Start Date:	Starting Salary:	
Comments:		

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