



82 Minnesota Avenue, Little Canada, MN 55117

RC Sales Application Form

Instructions: Please answer all questions. Sign and date the form.

PERSONAL INFORMATION

First Name: MI: Last Name:

Street Address:

City, State, Zip Code:

Phone Number: Email:

Are you eligible to work in the United States? Yes No

AVAILABILITY

| | | | | |
|------------------------------------|-----------------------|----------------------|----|----------------------|
| <input type="checkbox"/> Monday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |
| <input type="checkbox"/> Tuesday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |
| <input type="checkbox"/> Wednesday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |
| <input type="checkbox"/> Thursday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |
| <input type="checkbox"/> Friday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |
| <input type="checkbox"/> Saturday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |
| <input type="checkbox"/> Sunday | Hours Available: from | <input type="text"/> | to | <input type="text"/> |

What date are you available to start work?

EXPERIENCE

How many R/C vehicles do you own? (*cars, boats, planes, etc.*)

How long have you worked with R/C?

Please rank your knowledge of the following R/C related areas on a scale of 1 to 5.
5 being very familiar and 1 being not familiar.

- Cars: 1 2 3 4 5
- Boats: 1 2 3 4 5
- Helicopters: 1 2 3 4 5
- Planes: 1 2 3 4 5
- Quads: 1 2 3 4 5
- Batteries: 1 2 3 4 5
- Chargers: 1 2 3 4 5
- Quad Programming: 1 2 3 4 5

Please rank your knowledge of the following brands on a scale of 1 to 5.
5 being very familiar and 1 being not familiar.

- Traxxas: 1 2 3 4 5
- Arrma: 1 2 3 4 5
- Losi: 1 2 3 4 5
- HPI: 1 2 3 4 5
- Associated: 1 2 3 4 5
- Axial: 1 2 3 4 5
- Kyosho: 1 2 3 4 5
- E-Flite: 1 2 3 4 5
- Blade: 1 2 3 4 5
- Pro Boat: 1 2 3 4 5
- Spektrum: 1 2 3 4 5

Please rank your soldering experience on a scale of 1 to 5.
5 being very familiar and 1 being not familiar.

- Soldering: 1 2 3 4 5

Please rank your knowledge of the following hobby areas on a scale of 1 to 5.
5 being very familiar and 1 being not familiar.

- Paints: 1 2 3 4 5
Glues: 1 2 3 4 5
Gundam: 1 2 3 4 5
Trains: 1 2 3 4 5
Rockets: 1 2 3 4 5
Toys: 1 2 3 4 5
Games: 1 2 3 4 5

Flexible scheduling when needed? Yes No

Able to wear a mask or face covering for an 8 hour shift? (*Minus break period*) Yes No

EMPLOYMENT HISTORY

Present or Last Position:

Employer:

Address:

Supervisor:

Phone: Email:

Position Title: From: To:

Responsibilities:

Salary: Reason for Leaving:

May We Contact Your Present/Most Recent Employer? Yes No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature Date