

RAFN COMPANY OUTSIDE REFERRAL FORM

**THIS REFERRAL FORM TO BE COMPLETED AND SUBMITTED TO THE
RAFN HR DEPT. ALONG WITH THE CANDIDATE'S INFO, BEFORE OR AT
THE TIME OF INTERVIEW. PLEASE ATTACH RESUME, IF POSSIBLE.**

REFERRAL FOR OPEN ADVERTISED POSITIONS ONLY

Name of the Applicant: _____

Position Applied For: _____

Applicant's Address: _____

Land line: _____

Cell: _____

Email: _____

Current Organization, if any: _____

Current Designation, if any: _____

Total Years of Experience: _____

Relationship: _____

Personal Recommendation (years known, known qualifications & experience, etc...):

OUTSIDE REFERRER INFORMATION

Referred By: _____ Company: _____

Years at Company: _____ Mobile Number: _____

Title: _____ Email: _____

Personal Mail Address: _____

FOR HR USE ONLY

Referral Date: _____ Date of Referred Candidate's Hire: _____

Department: _____ Position Title: _____

What fee amount is applicable (Field/PE/PM & Supt): _____

Date Referral Fee due to Referrer: _____ Date Paid: _____

Initials: _____

Please contact Human Resources if you have any questions, 425-702-6635.