

APPLICANT INFORMATION

DATE: _____
Month Day Year

Name: _____ SS#: _____

Address: _____
Street City State zip

How Long at address: _____ Phone: () _____

E-mail Address _____

D.O.B.: _____ Place Of Birth: _____
City State

Position applying for: _____

How many years have you worked as an electrician? _____

Did you serve an Apprenticeship? Yes No Completion Certificate? Yes No

Years attended 1 2 3 4 5 Sponsoring company: _____

Location of Apprenticeship School _____
City State

Have you ever passed an examination given by an IBEW Local Union? Yes No

Have you ever been certified or ever possessed a journeyman electrician license?
Yes No

Which of the following phases of electrical installations have you performed?

Conduit Bending & Installation _____	Residential Wiring _____	Transformers _____
Rigid _____	Single Housing _____	Substations: _____
EMT _____	Condos _____	Cable Splicing _____
PVC _____	Apartments _____	Electronic Controls _____
Hydraulic Conduit Bending _____	High Rises _____	PLC's _____
Concrete Slab installation _____	Hotels _____	HMI's _____
Commercial lighting _____	Underground Dist. _____	VDV _____
Industrial Wring _____	Overhead Line Work _____	Alarm Systems _____
Maintenance & Trouble Shooting _____	Tilt-ups _____	Other _____
Control Wiring _____	Supervision _____	

Are you currently employed by an electrical contractor Yes No

If work is unavailable within 60 miles from your home, are you willing to travel:

60 to 90 miles from home Yes No other areas within the state Yes No

Out of state? Yes No Do you have a state drivers' license Yes No

EDUCATION AND WORK HISTORY

High School: _____ Graduated? Yes No

City & State: _____

College: _____ Graduated? Yes No

Trade School: _____ Graduated? Yes No

List the last three (3) employers (starting with the current or most recent employer), the dates of employment, wage rate, and type of work, or attach resume with above mentioned information.

Employer: _____

Address: _____

Dates of Employment: _____ Wage Rate: _____

Type of Work: _____

Employer: _____

Address: _____

Dates of Employment: _____ Wage Rate: _____

Type of Work: _____

Employer: _____

Address: _____

Dates of Employment: _____ Wage Rate: _____

Type of Work: _____

By signing this application I affirm that all statements made by me herein are true, complete, and correct to the best of my knowledge and belief, and are made in good faith to assist in determining my proper classification or group in accordance with the referral procedure regulations. I understand that any false statements would be cause for rejection of this application or cause for the removal of my name from the referral list and/or cause me to be discharged from the job.

Signature

Date