

WORK EXPERIENCE

Position Applied for _____
Do you have a state license Y ___ N ___ If yes what state _____
Did you achieve a passing score to secure this license Y ___ N ___ Year _____ Test Name _____
Can you work high off of the ground? _____ Ladder _____ Scaffold _____ Steel _____
Special skills _____
Have you served an apprenticeship? _____ How long? _____ Where? _____
Was it a Federally approved program? Yes _____ No _____
Have you ever passed an examination for Journeyman given by an I.B.E.W Local Union Yes _____ No _____
If so, where? _____ Local Union # _____
How many years experience have you had in the position applied for? _____
Do you currently hold an electrical license (if so type and state)? _____

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

Employer/Empresario: _____

Address/direccion: _____

Dates of Employment/ Fechas de employ: _____ Wage Rate/Sueldo: _____

Type of Work/Tipo de trabajo: _____

Comments: _____

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Type of Work/Tipo de trabajo: _____

Comments: _____

By signing this application I affirm that all statements made 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