

IBEW LOCAL UNION 531 Employment Information

Please Print Clearly	·		
Personal	•	:	
Date:	•		•
Name:			
Present Address:			
City—	State		
Phone Number:	Email Address:		
Do you have a valid Driver's License?	☐Yes ☐No Do you have re	liable transportation?	? ∐Yes ∐No
Are you over 18 years of age? ☐Yes	□No If No, when do you to	urn 18:	
Are you legally eligible to work in the Ur	nited States?		
Are you able to lift 50 pounds? Yes	∏No		
Education ———————			
Name & Location of School	Years Attended	Did you Graduate?	Subjects Studied
High School			
College			
Trade School	4		
Additional Ed.			
Special License			
General — — — — — — — — — — — — — — — — — — —	es □No If so what rank? _		
lave you ever been convicted of a Felo	ony?		
Do you have any construction experience			
lave you ever been a member of the IE			
lave you ever applied for IBEW membe			

Work History			
Complete the following for each of the employers you ha current/most recent employer (please be as thorough & a	, , , , ,		
1. Name of employer:	3. Name of employer:		
When were you employed?toto	When were you employed?to		
What was your starting hourly wage?	What was your starting hourly wage?		
What was your ending hourly wage?	What was your ending hourly wage?		
Did you receive any benefits?	Did you receive any benefits?		
2. Name of employer:	4. Name of employer:		
When were you employed?toto	When were you employed?to		
What was your starting hourly wage?	What was your starting hourly wage?		
What was your ending hourly wage?	What was your ending hourly wage?		
Did you receive any benefits?	Did you receive any benefits?		
How did you find out about the IBEW? CHECK ALL	THAT APPLY		
☐ Printed Materials ☐ Organizer ☐ Friend/Relative ☐ Union Video ☐ Website ☐ Other			
Release of Prior Personnel Records By signing this employment information sheet, I agree that all the employment information sheet for possible employment is true and concerning my employment, education, credit, or medical history wit agencies. I give these individuals, organizations, or governmental agincluding my pervious disciplinary record, without requiring them to information to you. I understand that no verification of my credit his Reporting Act may be undertaken by you without my express written	omplete. I understand that you may verify any of the information the appropriate individuals, organizations, or governmental encies my permission to release any information that you need, contact me or give me written notice before revealing the tory or request for a "consumer report" under the Fair Credit		
SIGNATURE:	DATE:		