

**ERA WIRE, INC.**  
**APPLICATION FOR EMPLOYMENT**

Instructions: Please print all information requested [except signature]. Print clearly in black or blue ink.  
Answer all questions. Sign and date the form.

Position Applying For	Salary Desired

EMPLOYMENT INFORMATION			
Last Name	First Name	Middle	
Address	City	State	Zip
Cell Phone	Alt. Phone		
Fax Number		E-Mail Address	

Are you employed at the present time? \_\_\_\_\_ If yes, please complete the information below:

Employer's Name: \_\_\_\_\_

Employer's Address: \_\_\_\_\_

1) How long have you been with this employer? \_\_\_\_\_ Present Salary: \_\_\_\_\_

2) If offered a position, when can you report for work? \_\_\_\_\_

3) If hired can you show proof of your legal right to work in the U.S.?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

4) Have you ever been dismissed, or asked to resign from any position?

<input type="checkbox"/>	<input type="checkbox"/>
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If yes to number 4, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Education**

Please list on the following lines all schools attended and any other pertinent information about your education.

**LEVEL OF EDUCATION**

Complete the following fields based on courses you have completed

LEVEL	SCHOOL-LOCATION	DATES ATTENDED	GRADUATED/ DEGREE	ADDITIONAL AWARDS/CERTS.
HIGH SCHOOL				
COLLEGE				
OTHER				

Military
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Have you ever been in the Armed Forces? ☐ YES ☐ NO

Are you now a member of the National Guard? ☐ YES ☐ NO

Specialty: \_\_\_\_\_

Date Entered: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

**WORK EXPERIENCE** Please list your work experience for the **past five years**, beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

Name of Last Supervisor	Employment Dates	Pay or Salary
	From:	Start:
	To:	Final:

Your Last Job Title: \_\_\_\_\_

Reason for Leaving (Be specific):

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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Name of Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

Name of Last Supervisor	Employment Dates	Pay or Salary
	From:	Start:
	To:	Final:

Your Last Job Title: \_\_\_\_\_

Reason for Leaving (Be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_

Name of Last Supervisor	Employment Dates	Pay or Salary
	From:	Start:
	To:	Final:

Your Last Job Title: \_\_\_\_\_

Reason for Leaving (Be specific): \_\_\_\_\_

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

May we contact your present employer?    ☐ YES    ☒ NO

Did you complete this application yourself?    ☐ YES    ☐ NO

ADDITIONAL INFORMATION THAT COULD HELP YOU QUALIFY FOR THIS POSITION
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Examples include; classes (include dates), certificates, current licenses, specific equipment and other skills.

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LIST REFERENCES (preferably) PERSONS WHO KNOW ABOUT YOUR WORK/TRAINING*OTHER THAN RELATIVES
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<u>Name</u>	<u>Address</u>	<u>Phone Number</u>
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I certify that all statements made herein and on the enclosed resume are true and correct to the best of my knowledge. I authorize investigation of all statements herein recorded. I release from liability all persons and organizations reporting information required by this application.

Applicant Signature	Date