



151 Mercer Street #11  
New York, NY 10012

## Employment Application

Please complete the application to the best of your ability

NYWiring is a equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by state, or federal law. Should a applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please email attached form to [info@nywiring.com](mailto:info@nywiring.com)

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO

Have you ever been convicted of a felony? YES  NO

If yes, explain: \_\_\_\_\_

### Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES  NO

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

**Areas of Expertise**

CCTV	<input type="checkbox"/>	Certification	<input type="checkbox"/>	Year Certified	_____
Access Control	<input type="checkbox"/>	Certification	<input type="checkbox"/>	Year Certified	_____
Low Voltage	<input type="checkbox"/>	Certification	<input type="checkbox"/>	Year Certified	_____
Audio Systems	<input type="checkbox"/>	Certification	<input type="checkbox"/>	Year Certified	_____
Data/ Phone	<input type="checkbox"/>	Certification	<input type="checkbox"/>	Year Certified	_____
Alarm System	<input type="checkbox"/>	Certification	<input type="checkbox"/>	Year Certified	_____
Osha Certified	<input type="checkbox"/>	Osha 10	<input type="checkbox"/>	Year Certified	_____
Osha Certified	<input type="checkbox"/>	Osha 40	<input type="checkbox"/>	Year Certified	_____

**Non-Certified Expertise**

Cable installation	<input type="checkbox"/>	How many years	_____
Audio installation	<input type="checkbox"/>	How many years	_____
Intercom installation	<input type="checkbox"/>	How many years	_____
CCTV installation	<input type="checkbox"/>	How many years	_____
Alarm System installation	<input type="checkbox"/>	How many years	_____
Computer Systems	<input type="checkbox"/>	How many years	_____

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*  
*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_