



THE BOAT COMPANY

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Last:	First:	Middle:	Telephone:	Date:
Present Address:	City:	State:	Zip Code:	Social Security Number:
Permanent Address:	City:	State:	Zip Code:	Date of Birth:
Email Address:			Referred by:	
In case of an emergency notify (name, address, and telephone number):				
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, do you have a visa or immigration status allowing you lawful employment in the U.S.? <input type="checkbox"/> Yes (provide copy) <input type="checkbox"/> No		
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, explain & state whether your conviction affects your fitness/ability to perform any job for which you are applying.		

EMPLOYMENT DESIRED

Please indicate position desired:		Hours preferred:	Identify any restrictions on travel or other work related activities:
<input type="radio"/> Captain	<input type="radio"/> First Mate	<input type="radio"/> Full time	
<input type="radio"/> Deckhand/Guide	<input type="radio"/> Deckhand/Naturalist	<input type="radio"/> Seasonal	
<input type="radio"/> Chef	<input type="radio"/> Chef Asst.	<input type="radio"/> Night shift	
<input type="radio"/> Other _____	<input type="radio"/> Steward	<input type="radio"/> Other	
	<input type="radio"/> Engineer	<input type="radio"/> Steward Asst.	
Have you worked for The Boat Company before?: <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, please give dates:	Merchant Mariner Number:
List Coast Guard licenses/rating:	List your specific training, skill, and experience, including certification, which you feel are relevant to this position:		

EDUCATION

	Name of School	City and State	Circle last year completed				Did you graduate?
High School			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No
College			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade or Business School			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No

US MILITARY SERVICE

Name of Service:	Rank:	Present Membership in Service, National Guard or reserves: <input type="checkbox"/> Yes <input type="checkbox"/> No
Honorable Discharge: <input type="checkbox"/> Yes <input type="checkbox"/> No	Dates:	

EMPLOYMENT RECORD

Last four employers, listing the most recent or current employer first:

Name of Employer:	Contact Person:	Type of Work/Special Skills:	Employment Dates (month and year): From: To:
Street Address	Telephone Number:		Salary Starting: Ending:
City:	State:	Zip:	Reason(s) for leaving:
Name of Employer:	Contact Person:	Type of Work/Special Skills:	Employment Dates (month and year): From: To:
Street Address	Telephone Number:		Salary Starting: Ending:
City:	State:	Zip:	Reason(s) for leaving:
Name of Employer:	Contact Person:	Type of Work/Special Skills:	Employment Dates (month and year): From: To:
Street Address	Telephone Number:		Salary Starting: Ending:
City:	State:	Zip:	Reason(s) for leaving:
Name of Employer:	Contact Person:	Type of Work/Special Skills:	Employment Dates (month and year): From: To:
Street Address	Telephone Number:		Salary Starting: Ending:
City:	State:	Zip:	Reason(s) for leaving:

I swear that the statements in this application are true and correct. I understand that any false or misleading statement or omission of material fact may result in dismissal. I authorize the Employer to investigate and verify any of the information I have submitted in applying for employment with the Employer. I understand that employment, if offered, will be at the will of myself and the Employer and may be terminated at any time for any reason by either party.

The Boat Company is an equal opportunity employer. Qualified applicants receive consideration for employment without discrimination because of sex, marital status, race, color, creed, national origin, age, or the presence of non job-related handicaps.

Signature of Applicant

Date

Interviewed by (print name and initial)

Date