DELAWARE BAY LAUNCH SERVICE, INC.



DATE:	_	EMPLOYMENT APPLICATION	
sex, national origin, disability, vete please fill in all spaces by typing or	ran's status or sexual orientation. In order to rec	iscriminate on the basis of race, color, religion, age, eive full consideration for employment opportunities, application may be rejected. All applications will be entinue to have an application on file.	
LAST NAME:	FIRST NAME:	M/I:	
ADDRESS:			
CITY:	STATE:	ZIP:	
HOME PHONE:	CELL PHONE:		
SS#	DATE OF BIRTH	# OF DEPENDENTS	
POSITION APPLYING FOR:		AVAILABLE START DATE:	
HAVE YOU EVER BEEN EMPLOYE	D WITH US BEFORE? (Y) (N) WHEN?		
DID A CURRENT/FORMER EMPLOY	YEE RECOMMEND YOU TO US? (Y) (N) IF SO WHO	?	
DO YOU HAVE RELIABLE TRANSP	ORTATION TO & FROM WORK?		
ARE YOU WILLING TO WORK OVE	RTIME IF REQUIRED? (Y) (N)		
LIST ANY PREVIOUS OFFSHORE V	/ESSEL EXPERIENCE INCLUDING VESSEL TYPE,	LENGTH, TONNAGE, NUMBER OF ENGINES:	
DO YOU HAVE ANY FELONY CON\ A COURT? IF YES, EXPLAIN:	` ,	AS NOT BEEN ANNULLED, EXPUNGED, OR SEALED BY	
	RKMANS COMPENSATION OR OTHER PAYMEN	TS, INCLUDING MAINTENANCE AND CURE FOR ANY	
LIST LICENSES AND CERTIFICAT PERMIT, CPR, FIRST AID, ETC.)	TES (DRIVERS LICENSE, TWIC, PASSPORT, CA	PTAINS LICENSE W/ TONNAGE & ROUTE, FCC OPR	
ТҮРЕ	NUMBER	EXPIRATION	
EDUCATION:			
HIGH SCHOOL:	DATES ATTENDED	GRADUATE	
TRADE SCHOOL:	DATES ATTENDED	GRADUATE	
COLLEGE:	DATES ATTENDED	GRADUATE	

LIST ANY SKILLS OR INFORMATION THAT MAY RELATE TO THE POSITION APPLYING FOR:

	LENGTH AND POWER. YOU MAY SUPPLEM MAY WE CONTACT:			
	START PAY:			
REASON FOR LEAVING:				
COMMENTS:				
EMPLOYER:	MAY WE CONTACT:	POSITION:		
DATES:	START PAY:	END PAY:		
REASON FOR LEAVING:				
COMMENTS:				
EMPLOYER:	MAY WE CONTACT:	POSITION:		
DATES:	START PAY:	END PAY:		
REASON FOR LEAVING:				
COMMENTS:				
EMPLOYER:	MAY WE CONTACT:	POSITION:		
DATES:	START PAY:	END PAY:		
REASON FOR LEAVING:				
COMMENTS:				
LIST ANY PHYSICAL PROBLEMS THAT WE SHOULD BE AWARE OF:				
	PLEASE READ THE FOLLOWING CAREFULLY			
repetitive physical demands of standing, walk	organization may require working in extreme ar ing, lifting and carrying weights of 50# or more, tting, kneeling, hearing, speaking and seeing to ? YES NO	pushing & pulling, climbing ladders, crawling,		
statements contained in this application. I und	n is true, correct and complete. I authorize Delay derstand that any misstatement or omission of fa employed may result in termination of employm t.	ct, regardless of when discovered, may result		
I understand that any offer of employment ma will be required by Delaware Bay Launch Serv	de to me will be conditioned upon the results of a vice under USCG guidelines.	a pre-employment drug screening test which		
I understand that I will be required to submit t	o a random drug & alcohol test from time to time	as a condition of my employment.		
I understand that if employed, my employmen for any reason and Delaware Bay Launch Serv	t will be for an indefinite period of time and that I vice may do so likewise.	may terminate my employment at any time		

DATE

APPLICANTS SIGNATURE