

SMITH MARINE TOWING CORPORATION EMPLOYMENT APPLICATION

Name: Last			First		Middle		Today's Date:		
Residence Street Address				City		State		Zip Code	
Home Phone (include Area Code):			Cell Phone (Include Area Code):			Social Security Number			
Position Applying For			Date Available for Work:			E-Mail Address			
Have you ever applied at Smith Marine Towing Corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, When?									
Have you ever been employed by Smith Marine Towing? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, When? What Tugs?									
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain. (A conviction may not disqualify you, but a false statement will.):									
EDUCATION									
Level Attained	Name and Location			Date From	Date To	Graduated	Diploma Or Degree	Major Subjects	
High School						<input type="checkbox"/> Yes <input type="checkbox"/> No			
G.E.D.						<input type="checkbox"/> Yes <input type="checkbox"/> No			
College						<input type="checkbox"/> Yes <input type="checkbox"/> No			
Trade School						<input type="checkbox"/> Yes <input type="checkbox"/> No			
List Other Study Or Training Certificates									
MMC <input type="checkbox"/> Yes <input type="checkbox"/> No Captain or Mate's MMC Reference Number: _____ Expiration Date: _____ List ALL Endorsement(s) on MMC such as Master or Mate of Towing, Steersman, etc.: 									

Medical Certificate National Expiration Date:

Medical Waiver Expiration Date, if applicable:

- STCW Training/USCG Training (Mark All That Apply):** Basic STCW Life Boatman First Aid/CPR/AED
 Blood Borne Pathogens Incipient Fire-Fighting Advanced Fire-Fighting Bridge Resource Mgt. FCC Radio
 Tankerman PIC Tankerman Restricted to Fuel Transfer QMED Engineer Water Survival with HUET
 Water Survival without HUET Safe Gulf/Rig Pass TWIC Card Expiration date: _____
 Marine Trash & Debris Rigger AP RP 2D GMDSS Vessel Security Officer (VSO) Radar

List Other Relevant Training Directly Related to the Position Applying:

MILITARY EXPERIENCE

Branch of Service	Dates of Service	Final Rank / Discharge
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AN EQUAL OPPORTUNITY EMPLOYER

EXPERIENCE

***** Begin with your Present or Most Recent Employment *****

Dates: Month/Year	Name and City/State of Employer	Position or Title	Name of Supervisor	Type of Vessel: Offshore Tug, Inland Tug, OSV, Crew Boat, etc.	Job Duties	Reason for Leaving
From _____ To: _____						
From _____ To: _____						
From _____ To: _____						
From _____ To: _____						
From _____ To: _____						
From _____ To: _____						

If currently employed, may we contact your employer? Yes No

Have you worked anywhere else not mentioned above? Yes No

REFERENCES

Please provide the names of two persons whom you have known for at least three years. These persons must not be related to you or be former employers.

Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: _____ Relationship & Years Known: _____

Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: _____ Relationship & Years Known: _____

EMERGENCY NOTIFICATION

Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ Telephone: _____ Relationship: _____

I authorize you, at the time of my application for employment or during the course of employment, to obtain information from any source as to my education, experience, character, medical history, financial or credit records. I hereby certify that this application and any attachments contain no willful or negligent misrepresentations or falsification, and that information given by me is true and complete. I understand that should an investigation disclose any such misrepresentation or falsification, my application will be rejected or, if employed by Smith Marine Towing Corporation, cause my dismissal. By completing this application, I understand that if a contingent offer of employment is made in the future, then it will be subject to the successful completion of the other employment and job-related qualifications that Smith Marine Towing Corporation is entitled to consider.

Employment with Smith Marine Towing Corporation is terminable at will by either party without cause and without notice. As an employee at will, you may voluntarily resign your employment at any time and Smith Marine Towing Corporation may terminate your employment at any time without cause or prior notice. No one at Smith Marine Towing Corporation is authorized to change the at-will nature of the employment relationship between you and Smith Marine Towing Corporation except the President in a written agreement signed by him.

I acknowledge by Printing My First and Last Name below that the information above on this application is true and correct:

Print First Name to Acknowledge: _____ Print Last Name to Acknowledge: _____ Date of Acknowledgement of above application: _____

