MILLER MARINE SERVICES

Application for Employment

Date:	
Name:	SS# (last four)
	·
Telephone:	Alternate Telephone:
Date of Birth:	<u> </u>
If so please explain:	ıl activity:
Hobbies:	
Have you ever been convicted of a crir If so please provide details:	ne:
Do you have a valid driver's license: _	
If so please list license number:	
Emergency Notification:	Phone:
<u>EMPLOYMENT</u>	
What position are you applying for:	
Circle the type of employment you are	seeking: (Full Time/ Part Time/ Temporary)
Are you currently employed:	If so, where:

Do you have a US Merchant Marine Officers License:			
If so, what tonnage & Routes:			
Previous Employment			
1) Company:			
Dates of employment: From	To:		
Duties and Responsibilities:			
Salary:	Reason for leaving:		
2) Company:			
Dates of employment: From	To:		
Duties and Responsibilities:			
Salary:	Reason for leaving:		
3) Company:			
Dates of employment: From	To:		
Duties and Responsibilities:			
Salary:	Reason for leaving:		
Please list two references:			
Name:	Name:		
Address:	Address:		
Telephone:	Telephone:		
Relationship:	Relationship:		

Marine Experience:

Starting with the most recent, name and describe the vessels you have worked on in the past:

Vessel Name:		Gross Tonnage:	
Routs:			
Dates as crew: From			
Vessel Name:		Gross Tonnage:	
Routs:			
Dates as crew: From	To		
Vessel Name:		Gross Tonnage:	
Routs:			
Dates as crew: From			

EDUCATION
High School:
Vocational School:
College:
Degrees:
Please list any special job-related skills and qualifications acquired from employment of other experiences:
GENERAL
Can you be away from home for a week or more with very little notice:
Do you have dependable transportation:
Can you splice line: Can you tie a bowline:
Have you ever filed an application with us before:
PLEASE READ THIS STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION
I hereby certify that the information contained in this application is correct to the best of my knowledge and understand that, if I am employed, any misrepresentation of omission of material facts on this application, regardless of when discovered, is sufficient cause for dismissal. I understand that my employment and compensation can be terminated at any time without cause and with or without notice at any time, at the option of Miller Marine Services Inc. or myself. I understand that no one has the authority to promise permanent employment of employment for a definite period of time. The company, in considering my application for employment, may verify the information set forth in this application and obtain additional information relating to my background. I authorize all persons, schools, companies, corporations, credit bureaus, law enforcement agencies and doctors to supply any information concerning my background. Provided state law permits, I further agree to submit to alcohol and drug screening tests and polygraph examinations, if requested of me at any time prior to, or during my employment.

Date

Applicant's Signature