



Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those Applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name: _____ Date: _____

Position(s) applied for or type of work desired: _____ Salary Desired: _____

Address: _____

Telephone #: _____ Cell #: _____ Email Address: _____

Social Security #: _____

Type of work desired: Full Time Part-Time Temporary

Date you will be available to start work: _____

Are you able to meet the attendance requirements? _____ Yes _____ No

Do you have any restrictions or conditions which would prevent you from fulfilling the requirements of this job? _____ Yes _____ No

Do you have any objections to working overtime if necessary? _____ Yes _____ No

Can you travel if required by this position? _____ Yes _____ No

Have you previously been employed by this organization? _____ Yes _____ No

Can you submit proof of legal employment authorization and identity? _____ Yes _____ No

If you are under 18, can you furnish a work permit if it is required? _____ Yes _____ No

Have you been convicted of a crime in the last 7 years? _____ Yes _____ No

If yes, please explain (a conviction will not automatically bar employment): _____

Employment History

Please provide all employment information for your past 3 employers starting with the most recent

Are you employed now? _____ May we contact your present employer? _____

Employer: _____ Position Held: _____

Address: _____ Telephone #: _____

Immediate Supervisor and title: _____

Dates employed: From: _____ To: _____ Salary: _____

Job Summary: _____

Reason for Leaving: _____

Employer: _____ Position Held: _____

Address: _____ Telephone #: _____

Immediate Supervisor and title: _____

Dates employed: From: _____ To: _____ Salary: _____

Job Summary: _____

Reason for Leaving: _____



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Employment History Continued

Employer: _____ Position Held: _____
 Address: _____ Telephone #: _____
 Immediate Supervisor and title: _____
 Dates employed: From: _____ To: _____ Salary: _____
 Job Summary: _____
 Reason for Leaving: _____

Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

Educational History

List school name and location, years completed, course of study, and any degrees earned:
 High School: _____
 College: _____
 Technical Training: _____
 Other: _____

References

Name	Telephone #'s	Years Known	Relationship

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and it's representatives for seeking, gathering, and using such information to make decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature: _____ Date: _____

Applications can be emailed to: info@offshoretechnical.com