



## Employment Application

Central Boat Rentals, Inc.  
1640 River Rd  
Berwick, LA 70342  
Phone: 985-385-4649  
Fax 866-563-7003

***Please Print***

Name \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

Position(s) Applied For:

\_\_\_\_ Captain \_\_\_\_ Relief Capt \_\_\_\_ Pilot \_\_\_\_ Mate \_\_\_\_ Steersman

\_\_\_\_ Able Seaman \_\_\_\_ Ordinary Seaman \_\_\_\_ Deckhand \_\_\_\_ Tankerman

\_\_\_\_ Mechanic \_\_\_\_ Crane Operator \_\_\_\_ Welder/Fitter \_\_\_\_ General Labor

Date of Application: \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Drivers Lisc # \_\_\_\_\_ State: \_\_\_\_\_ Expiration: \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

Identifying Scars, Birthmarks, or Tattoos: \_\_\_\_\_

Can you perform each of the essential functions of the job that you are applying for?  Yes  No. *(If No, Please Explain)*

\_\_\_\_\_ *If you do not know the essential functions, please ask the company representative for a copy of the job description*

Circle Availability to work: Full Time Part Time Days: M T W T F S S

How did you learn about this employment opening?  Newspaper  Internet

Radio Ad  Billboard  Company Employee  Publication  School

Worked with our boats *(If an employee, ad, publication etc, please list specific person or ad)* \_\_\_\_\_

Have you ever worked for this company or one of its affiliates?  yes  no

*If yes, please list dates and positions.* \_\_\_\_\_

Have you ever been convicted of a crime or felony, other than a minor traffic offense?  Yes  No If yes, please list date and nature of conviction and punishment imposed: \_\_\_\_\_

Have you ever been fired or asked to resign from any employment?  Yes  No  
 If yes, please explain below:

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**EDUCATION**

	Name & Location of School	Course of Study	# of Years Completed	Diploma or Degree Received
High School				
Votech or Trade School				
Votech or Trade School				
College				

**EMPLOYMENT HISTORY** (*Start with your current or most recent employment*)

Are you currently employed?  yes  no    If yes, can we contact them?  yes  no  
 If you are currently employed, why are you considering leaving that employment?

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Name of Employer	Telephone Number including area code	
Full Address (Including Street, City, State & Zip code)	Supervisors Name	
Dates Employed From: _____ To: _____	Beginning Position	Ending Position
Describe your Job Duties & Responsibilities	Starting Pay	Ending Pay
Reason for Leaving		

Name of Employer	Telephone Number including area code
Full Address (Including Street, City, State & Zip code)	Supervisors Name
Dates Employed From: _____ To: _____	Beginning Position                      Ending Position
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Full Address (Including Street, City, State & Zip code)	Supervisors Name
Dates Employed From: _____ To: _____	Beginning Position                      Ending Position
Describe your Job Duties & Responsibilities	Starting Pay                                      Ending Pay
Reason for Leaving	

## PERSONAL OR PROFESSIONAL REFERENCES

#1. Name	Occupation
Relationship to you	Is this a work reference? If yes, where employed?
Full Address (Including Street, City, State & Zip code)	Telephone Number including area code

#2. Name	Occupation
Relationship to you	Is this a work reference? If yes, where employed?
Full Address (Including Street, City, State & Zip code)	Telephone Number including area code

#3. Name	Occupation
Relationship to you	Is this a work reference? If yes, where employed?
Full Address (Including Street, City, State & Zip code)	Telephone Number including area code

## EMPLOYMENT ELIGIBILITY

Are you related to a current or former Central Boat Rentals Employee yes no  
If yes, please give name and relation. \_\_\_\_\_

Are you at least 18 years of age? yes no

Are you legally eligible to work in the United States as outlined by the US Government and if hired can you provide genuine documentation verifying this eligibility? yes no

## US COAST GUARD CREDENTIALS

What is the reference number on your Merchant Mariners License? \_\_\_\_\_

What is the expiration date on your Merchant Mariners License? \_\_\_\_\_

What rating(s) are endorsed on your Merchant Mariners License?

\_\_\_ OS/Wiper/SD \_\_\_ AB OSV \_\_\_ AB Limited \_\_\_ Tankerman PIC – Barge (DL)  
\_\_\_ QMED/Oiler \_\_\_ AB Special \_\_\_ AB Unlimited \_\_\_ Tankerman PIC – Barge (LPG)

What is the capacity of your US Coast Guard License (please check all that apply & fill in tonnage limitations if any:

\_\_\_ Master of Towing Vessels Upon \_\_\_ Oceans \_\_\_ Near Coastal \_\_\_ Western Rivers

Do you have a tonnage restriction on your MOTV? \_\_\_yes \_\_\_no \_\_\_\_\_ Limit

\_\_\_ Mate of Towing Vessels Upon \_\_\_ Oceans \_\_\_ Near Coastal \_\_\_ Western Rivers

Do you have a tonnage restriction on your MOTV? \_\_\_yes \_\_\_no \_\_\_\_\_ Limit

Do you have a valid United States Passport? \_\_\_yes \_\_\_no If yes, please provide the passport number and expiration date below:

\_\_\_\_\_

## Applicant Consent

Please read each of the following statements and place your initials by each to indicate that you understand and agree to the terms stated, then sign this form at the bottom.

\_\_\_ I certify that all information that I have supplied on this form is correct to the best of my knowledge. I understand that omissions or deliberate misinformation will disqualify my application and, if hired, would serve as grounds for dismissal.

\_\_\_ I consent to have Central Boat Rentals, Inc. or its agents contact the people and companies listed on this form for references and authorize these individuals to provide truthful information regarding my qualifications for employment and previous work history. I also agree to waive liability against persons and companies named as references, provided the information they supply is honest, factual and given without malice.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Emergency Contact

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name of Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_



## MEDICAL RELEASE

I \_\_\_\_\_, hereby authorize the release of any and all information in my medical records to Central Boat Rentals, Inc. with regard to any injury or illness for which I have been examined, observed, and or / or treated, including all history, findings, and diagnosis.

<b>ACCEPT</b>
I, the undersigned, have read and understand the nature of this MEDICAL RELEASE form and my signature serves as permission to release my medical records to Central Boat Rentals, Inc.
Print Full Name:
Signature: _____ Date: _____

<b>Decline</b>
I, the undersigned, DO NOT give permission for the release of my medical record to Central Boat Rentals, Inc.
Print Full Name:
Signature: _____ Date: _____



APPLICATION AND ACKNOWLEDGEMENT OF TERMS AND CONDITIONS OF APPLICATION. IT IS IMPORTANT THAT YOU READ THIS SECTION CAREFULLY AND THAT YOU FULLY UNDERSTAND IT BEFORE YOU SIGN IT. THIS SECTION AFFECTS YOUR LEGAL RIGHTS. IF YOU HAVE ANY QUESTIONS, PLEASE ASK A CENTRAL BOAT RENTAL, INC. REPRESENTATIVE BEFORE YOU SIGN THIS APPLICATION FORM.

In exchange for Central Boat Rentals, Inc's consideration of this employment application:

1. I promise that all information I have supplied in this application and any other form, oral or written, is true and accurate and I agree that any misstated, misleading, incomplete or false information is grounds for rejections of this application, refusal to hire, withdrawal of an offer of employment or immediate discharge without recourse, whenever and however discovered. I make this promise because I understand that you will rely on my statements to you in making your decision whether to hire me.
2. I understand and agree that Central Boat Rentals, Inc. any agen acting on their behalf, as well as any other person responding to a reference request pursuant to this application, can and will seek and or disclose any and all information about me and I agree to hold said corporation, agent, or person harmless for same. This is, I will not file a lawsuit or claim against them for such disclosure. Nor will I threaten same or otherwise seek any kind of compensation for such disclosure.
3. I understand and agree with the fact that Central Boat Rentals, Inc. maintains a drug-free workplace, that maintenance of same is essential to the safety of the workplace and employees, and that I may be required to undergo a pre-employment drug and or alcohol screening and testing, or paper and pencil tests designed to ascertain my suitability for employment and or job(s) for which I am being considered. I also understand and agree that I will be subject to such testing during the course of my employment and I specifically agree not to oppose in any fashion such pre-hire or post hire testing. I understand that, subject to applicable law, Central Boat Rentals, Inc. shall be the sole judge of the acceptability of any test results. I also acknowledge that I have been advised that Central Boat Rentals, Inc is an Equal Employment Opportunity Employer, that Central Boat Rentals, Inc does not discriminate against persons who are physically or mentally disabled and that Central Boat Rentals, Inc. administers its employment policies in a nondiscriminatory manner.
4. I understand that I can request from Central Boat Rentals, Inc. a copy of Central Boat Rentals, Inc.'s employee handbook and that if I so desire, I can review said handbook before I submit this application. I agree to abide by the provisions of the handbook including without limitation: the requirement that any accident, or injury, no matter



how minor, be immediately reported to the Central Boat Rentals, Inc. management. I also agree to comply with the company's vehicle driving and seat belt policies.

5. U understand and agree that, if hired, my employment will be at will, and that I or Central Boat Rentals, Inc. can terminate this employment relationship at any time, with or without notice, for any reason, good or bad, without recourse by either of us. I also understand that if I am hired, Central Boat Rentals, Inc. has a 90 day "familiarization period" during which I am expected to determine as quickly as possible whether I wish to continue working for Central Boat Rentals, Inc., just as Central Boat Rentals, Inc. will determine as quickly as possible whether it wants me to continue working for Central Boat Rentals, Inc. Nothing about this familiarization period, or its completion changes the fact that, if hired, my employment will be at will.
6. I understand and agree that work schedules and requirements vary and can be unpredictable, and that, while Central Boat Rentals, Inc. will make reasonable efforts to accommodate work schedules and employee availability, I may be required to work overtime, weekends, different shifts or other arrangements. I understand that crew changes can occur early or may happen late. I consent to these requirements as necessary and legitimate conditions of employment.
7. I have read and understand everything on this application and have had the opportunity to ask any questions to a Central Boat Rentals, Inc. representative.

\_\_\_\_\_  
Applicant Printed Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

By my signature below, I attest that I witnessed and heard the above named applicant read out paragraph 5 and 6 of this applicant acknowledgement, and that it was apparent to me that said applicant understood the meaning of the words he or she spoke, and that I have witnessed said applicants signature.

\_\_\_\_\_  
Witness Printed Name

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

## **DISCLOSURE**

A consumer report and/or investigative consumer report including information concerning your character, employment history, general reputation, personal characteristics, police record, criminal records, education, qualifications, motor vehicle record, mode of living and/or credit and indebtedness may be obtained in connection with your application for and/or continued employment with the employer. **A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your employment with the company.**

These reports may include experience information along with reasons for termination of past employment. Further, understand that information from various Federal, State, local and other agencies which contain your past activities may be requested. A consumer report containing injury and illness records and medical information may be obtained after a tentative offer of employment has been made.

The name, address and telephone number of the Company preparing the report is: First Advantage P.O. Box 3367 Seminole, FL 33775-3367; Toll free number: 1-800-321-4473 ext. 8. Their privacy Policy can be reviewed at <http://www.fadv.com/privacy-policy>.

Before any adverse action is taken, based in whole or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address and telephone number of the reporting agency, and a summary of your rights under the Fair Credit Reporting Act.

For California, Minnesota or Oklahoma applicants only, if you would like to receive a copy of the consumer report, if one is obtained, please check this box. If checked and you are a California applicant, a copy of the consumer report will be sent within three (3) days of the employer receiving a copy of the consumer report.

For California applicants only, if public record information about your character, general reputation, personal characteristics, and mode of living is obtained without using a consumer reporting agency, you will be supplied a copy of the public record information within seven (7) days of the employer's receipt unless you check this box where you hereby wave your right to obtain a copy of the investigative consumer report .

Please be advised that you have a right to inspect the files that the Consumer Reporting Agency may have on you during normal business hours and upon you furnishing proper identification.

**AUTHORIZATION**

By signing below, you hereby authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information. You further authorize ongoing procurement of the above mentioned reports at any time during your employment (or contract). You also agree that a fax or photocopy of this authorization with your signature be accepted with the same authority as the original.

You hereby authorize and request, without any reservation, any present or former employer, school, police department, financial institution, division of motor vehicles, consumer reporting agencies, or other persons or agencies having knowledge about you to furnish First Advantage with any and all background information in their possession regarding you, in order that your employment qualifications may be evaluated.

**Print your Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

**Driver's License State:** \_\_\_\_\_ **License Number:** \_\_\_\_\_

*The following is for identification purposes only to perform the background check:*

**Date of Birth (MM/DD/YYYY):** \_\_\_\_\_ **Race:** \_\_\_\_ **Gender (M or F):** \_\_\_\_\_

**Other or Former Names:** \_\_\_\_\_

**Professional License:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Type:** \_\_\_\_\_ **Number:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_