

Boat Service of Galveston Inc./Galveston Party Boats Inc.

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, veteran status, marital status, disability, handicap, sexual orientation, citizenship status, or any condition prescribed by state or local law.

PERSONAL

Last Name

First

Middle

Date

Street Address

Home Telephone

City, State, Zip

()
Business or Cell Telephone

Date & Place of Birth (City, State, County)

()
Social Security #

Have you ever applied for employment with us?

Pay Expected

Yes No If yes: Month and Year

Will you work overtime if asked?

Position Desired

Yes No

Apart from absence for religious observance, are you available for full-time work?

When will you be available to begin work?

Yes No If not, what hours can you work?

Have you ever been bonded?

Are you legally eligible for employment in the United States?

Yes No
If "Yes", with what employers?

Have you been convicted of any felony crimes in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court?

Yes No If "Yes", describe in full.

Other special training, skills (languages, machine operation, etc.)

EDUCATION

School	Name and Location of School		Course of Study	# of Years Completed	Did you Graduate?	Degree or Diploma
CAPTAINS LICENSE						
College						
Business/Trade/ Technical/Military						
High School						
CPR	YES	NO	EXP. DATE		#	
TWIC	YES	NO	EXP. DATE		#	

REFERENCES

Name	Address	Business	Years Known

EMPLOYMENT	Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.
Company name	Telephone ()
Address	Employed-(State month & year) From To
Name of Supervisor	Weekly pay Start Last
State Job Title and Describe Your Work	Reason for leaving

Company name	Telephone ()
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APPLICANT'S SIGNATURE

Please read and understand this statement before signing your application:

The information I have provided in the Application for Employment is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, educational institutions and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I fully understand and accept all terms and conditions in the above statement.

Date

Signature