

Dann Marine Towing, LC Employment Application



Dear Applicant:

Thank you for your interest in Dann Marine Towing, please complete ALL of the enclosed new applicant forms and return to the personnel department of Dann Marine Towing as soon as possible.

Please include a copy of the following:

**United States Coast Guard License, including any & all endorsements:
Radar Training
STCW Certification and or any other endorsements**

The new applicant forms include the following:

**Application For Employment
Employment History Form
Copies of requested documents (listed above)**

Return Completed Application To:

**Dann Marine Towing, LC
PO Box 250
Chesapeake City, MD 21915
OR FAX..... 410-885-5570**

If you have any questions, please do not hesitate to call me. I look forward to hearing from you soon.

Thank you,

**Personnel Manager
Dann Marine Towing, LC**

EMPLOYMENT APPLICATION
Dann Marine Towing, LC

NOTICE – Dann Marine Towing, LC is an equal opportunity employer. All prospective employees will equal receive consideration regardless of race, color, sex, age, national origin, religion, disability, or veteran status. Discrimination and Harassment will not be tolerated.

PERSONAL

Last Name _____ First _____ Middle _____

Street Address _____ City _____ State _____ Zip Code _____

How long have you been a resident of this state or city? _____ Are you 18 or older? Y / N

Telephone: _____ Cell Phone: _____

E-mail address : _____

Best time to reach you? _____

Have you ever applied to Dann Marine Towing, LC? Yes / No If yes, Month _____ Year _____

Are you available for Full Time Employment? Yes ___ No ___

If no, when can you work? _____

Will you work overtime if asked? Yes ___ No ___ When are you able to begin work? _____

What Position are you applying for? _____ Expected Pay: _____

What other positions are you interested in? _____

Are you legally eligible for employment in the United States? Yes ___ No ___

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

Yes ___ No ___

Have you been subject to a random drug screening in the past 6 months? Yes ___ No ___

Date: ___/___/___

Did you serve on the U.S. Armed Forces? Yes ___ No ___ If yes, what branch: _____

Describe any training you received in the U.S. Armed Forces that is relevant to the position for which you are applying: _____

Were you referred to Dann Marine Towing, LC? Yes ___ No ___

If yes, by whom: _____

Do you have any friends or relatives working for Dann Marine Towing, LC? Yes ___ No ___

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

FOR COMPANY USE ONLY

Interviewed By: _____ Date Hired _____ Vessel _____

Position: _____ Starting Rate: _____

Comments: _____

EMPLOYMENT APPLICATION

Dann Marine Towing, LC

EMPLOYMENT HISTORY

Starting with your most recent employer, list any employers you've been employed with in the past 5 years

Use additional paper to report additional employers, if any

PLEASE PROVIDE ACCURATE, COMPLETE FULL AND PART TIME EMPLOYMENT RECORD

If currently employed: My current employer may be contacted YES NO

COMPANY NAME: _____ From _____ to _____

Address: _____ Phone: _____

Supervisors Name _____ Starting Pay _____ Finishing Pay _____

Job Title and Duties Performed: _____

Reason For Leaving: _____

COMPANY NAME: _____ From _____ to _____

Address: _____ Phone: _____

Supervisors Name _____ Starting Pay _____ Finishing Pay _____

Job Title and Duties Performed: _____

Reason For Leaving: _____

COMPANY NAME: _____ From _____ to _____

Address: _____ Phone: _____

Supervisors Name _____ Starting Pay _____ Finishing Pay _____

Job Title and Duties Performed: _____

Reason For Leaving: _____

COMPANY NAME: _____ From _____ to _____

Address: _____ Phone: _____

Supervisors Name _____ Starting Pay _____ Finishing Pay _____

Job Title and Duties Performed: _____

Reason For Leaving: _____

COMPANY NAME: _____ From _____ to _____

Address: _____ Phone: _____

Supervisors Name _____ Starting Pay _____ Finishing Pay _____

Job Title and Duties Performed: _____

Reason For Leaving: _____

COMPANY NAME: _____ From _____ to _____

Address: _____ Phone: _____

Supervisors Name _____ Starting Pay _____ Finishing Pay _____

Job Title and Duties Performed: _____

Reason For Leaving: _____

EDUCATION

High School _____ Did you graduate? _____

Trade / Technical School / College: _____ Type Of Diploma _____

Coast Guard License: _____ Endorsement: _____

Special Training or Skills: _____

EMPLOYMENT APPLICATION
Dann Marine Towing, LC
Disclosure and Release of Information Authorization

I authorize Dann Marine Towing LC to retrieve information from all personnel, educational institutions, government agencies, companies corporations, law enforcement agencies of the federal, state (including the Minnesota Bureau of criminal Apprehension), and or county level, or individuals, relating to my past activities, to supply any and all information concerning my background. Further, I hereby release all of those entities from any liability resulting in providing such information. The information received may include, but is not limited to, academic, residential, achievement, job performance, attendance, litigation, accidents and personal injury, personal history, driving history, criminal records, and information related to my participation in, and results of, any drug testing conducted pursuant to Title 46 C.F.R. I understand that a consumer report may be prepared summarizing this information. If my prior employers and /or references are contacted, the report may include information obtained through personal interviews regarding my character, general reputation, personal characteristics and/or mode of living. I may request a copy of any report that is prepared regarding me and may also request the nature and substance of all information about me contained in the files of the reporting agency. I understand that proper identification will be required and that I should direct my request to the reporting agency that provided the report.

Applicant Signature

NOTE: The following information is provided ***VOLUNTARILY*** and ***IS NOT*** considered as part of your application for employment. It is used only for Identification purposes in verifying information on your Employment Application.

Last Name	First Name	Middle Name	

Street Address	City	State	Zip Code

Drivers License Number		State Of License	

List any cities and states in which you have lived in during the past 7 years:

List any LAST NAMES you have used during the past 7 years:

List any other last names under which you received your GED, HS Diploma, or any other degree:

I hereby certify that all the statements and answers set forth during the application process to Dann Marine Towing, LC both orally and in writing, including but not limited to the application form and/or my resume, are true and complete to the best of my knowledge. I understand that acceptance of an offer of employment does **not** create a contractual obligation upon the employer to continue to employ me in the future. I understand that if my representations are false or I have omitted relevant information, such false representations or omissions will be just cause to deny me employment or to terminate my employment if it has begun. I understand that prior to employment Dann Marine Towing, LC will require, and initially pay for, a complete physical and functional capacity test ("FCT"). I understand that I am under no duty to reimburse Dann Marine Towing for these costs: 1.) if I fail to pass either the physical or FCT, or 2.)I pass both tests and am continuously employed by Dann Marine Towing for a period of 180 days from the date of my hire. If, however, I am employed by Dann Marine Towing and I voluntarily terminate my employment, or if my employment is terminated for misconduct or poor performance, prior to the 180th day from the date of hire, I will be required to reimburse Dann Marine Towing for all costs associated with the physical and FCT, and those costs may be withheld by Dann Marine Towing from my wages or any other amounts to which I may be entitled from Dann Marine Towing.

A photocopy of this authorization shall be accepted with the same authority as the original

Applicant Signature (required)

DATE