



LOG ID #
(Do not write in the space below)

EMPLOYMENT APPLICATION

PRINT IN BLACK INK OR TYPE. These instructions must be followed exactly. Fill out application form completely. If question is not applicable, enter "NA." **Do not leave questions blank.** Be sure to sign when completed. Freedom Marine Services is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. You may make copies of this application and enter different position titles, but **each copy must be signed.** **Resumes will not be accepted in lieu of applications,** unless specifically stated in the job vacancy notice. This application becomes public record and is subject to disclosure.

NAME _____ Social Security No. _____ - _____ - _____
(Last) (First) (Middle)

MAILING ADDRESS _____
(Street) (City) (State) (Zip)

HOME PHONE (____) _____ - _____ BUSINESS or CELL PHONE (____) _____ - _____ TODAY'S DATE _____

List exact title of position for which you wish to apply:

Can you, after employment, submit verification of your legal right to work in the United States? ☐ YES ☐ NO

Are you at least 18 years of age? ☐ YES ☐ NO

Have you ever been accused of unlawful discrimination, including sexual harassment? ☐ YES ☐ NO
(If your answer is "Yes," please attach a separate sheet to explain. An affirmative answer will not necessarily disqualify you.)

Have you ever been convicted of a felony? ☐ YES ☐ NO
(If your answer is "Yes," please explain below. A conviction may not disqualify you, but a false statement will.)

EDUCATION

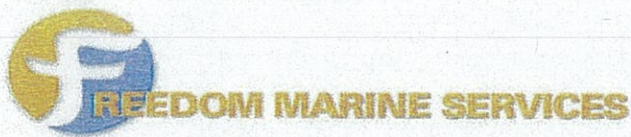
(NOTE: Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certificates and registrations.)

Indicate Highest Grade Completed: 1 2 3 4 5 6 7 8 9 10 11 12

Did you graduate from high school or receive GED? ☐ YES ☐ NO

Type of School	Name & Location of School	Dates Attended	Date Graduated	Expected Graduation Date	Sem/Clock Hours Completed	Type of Diploma or Degree	Major/Minor Fields of Study
Undergraduate Colleges or Universities							
Graduate Schools							
Technical, Vocational, or Business Schools							

Date Received _____ Time Received _____ Received By _____



Licenses/Certifications

If a license, certificate, or other authorization is required or related to the position for which you are applying, complete the following:

LICENSE/CERTIFICATION	Date issued	Date expires	Issued by/Location of issuing authority (State or other authority) (City & State)	License No.

Special Training/Skills/Qualifications: List all job related training or skills you possess and machines or office equipment you can use, such as heavy equipment, printing or graphics equipment, computer equipment, types of software and hardware. (Attach additional page, if necessary.)

Employment Query

Are you presently employed? ☐ YES ☐ NO If yes, may we contact your present employer? ☐ YES ☐ NO

Have you ever applied with Jettco or Freedom before? ☐ YES ☐ NO

Have you ever been employed by Jettco or Freedom? ☐ YES ☐ NO

How were you referred to Jettco or Freedom Marine?

☐ Advertisement ☐ Employee Referral ☐ Walk-In ☐ Agency ☐ Other _____

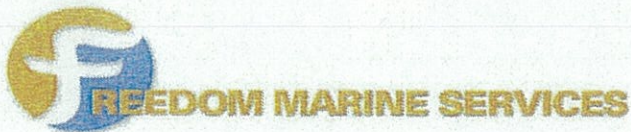
Driver's License: ☐ YES ☐ NO If so, type (Personal, Commercial, etc...) _____

Endorsements _____ Expiration Date ____/____/____

Employment History: (Provide detail; do not use "see resume.")

- Start with current or last job- include armed forces service and self-employment
- Any change of job title under the same employer should be considered a separate position.
- Employer addresses must be complete, including zip codes

1.	Employer	Telephone No.	Supervisor's Name	
	Type of Business	Address		
Your Job Title		Dates Employed (indicated months & years)		Average Hours Worked Per Week
		From:	To:	
Duties:				
Base Rate of Pay		Reason For Leaving		
Start: Final:				



2.	Employer	Telephone No.	Supervisor's Name
Type of Business		Address	
Your Job Title		Dates Employed (indicated months & years) From: To:	Average Hours Worked Per Week
Duties:			
Base Rate of Pay Start: Final:		Reason For Leaving	

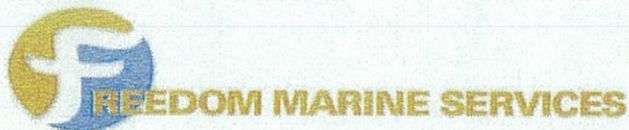
3.	Employer	Telephone No.	Supervisor's Name
Type of Business		Address	
Your Job Title		Dates Employed (indicated months & years) From: To:	Average Hours Worked Per Week
Duties:			
Base Rate of Pay Start: Final:		Reason For Leaving	

4.	Employer	Telephone No.	Supervisor's Name
Type of Business		Address	
Your Job Title		Dates Employed (indicated months & years) From: To:	Average Hours Worked Per Week
Duties:			
Base Rate of Pay Start: Final:		Reason For Leaving	

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatements or omissions of fact on this application may result in my dismissal. 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.

Applicant's Signature _____

Date _____



AUTHORIZATION FORM FOR CONSUMER REPORTS

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATED YOUR UNDERSTANDING AND ACCEPTANCE BY SIGING IN THE SPACE PROVIDED

1. In connection with your application for employment (including contacts for services), understand that consumer reports or investigative consumer reports which may contain public record information may be requested or made on you including consumer credit, criminal records, driving record education, prior employer verification, workers compensation claims and others. These reports will 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 will be requested. A consumer report containing injury and illness records and medical information may be obtained only after a tentative offer of employment has been made.

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 have the right to make a request, upon proper identification, for the information in your file at the time of your request. 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 and all background information in their possession regarding you, in order that your employment qualifications may be evaluated.

2. If employed by Jettco Marine Services LLC, dba Freedom Marine Services I will abide by policies and rules. I understand that I will be required to possess a current and valid driver's license.

3. If I am offered employment, I understand and agree that I will be required to undergo a medical examination at Jettco Marine Services LLC, dba Freedom Marine Services expense and that my offer of employment is conditioned by that examination. I agree to authorize release of all results or information obtained from such medical examination to an appropriate Jettco dba Freedom Marine Services representative.

4. If I am offered employment, I give my authorization for the release of my adult criminal history record.

5. If I am offered employment, I give my authorization for the pre-employment certification to submit to drug and/ or alcohol testing.

6. I understand and agree that unlawful harassment, whether on the basis of race, color, religion, national origin, sex, age, etc., or any other legally protected characteristic will not be tolerated.

My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct. My signature below also certifies that I agree to be bound by the term conditions stated in this application. This application contains all the understandings and agreements between me and Jettco Marine Services LLC, dba Freedom Marine Services concerning the nature of my employment and supersedes all prior and/or contemporaneous practices, oral or written agreement, understandings, statement, representations and promises, express or implied, between me and Jettco Marine Services LLC, dba Freedom Marine Services. I understand and agree that, except as noted above, no person who is either an agent or employee of Jettco Marine Services LLC, dba Freedom Marine Services may modify, delete, vary or contradict, whether orally or in writing, the terms and conditions of employment set forth herein.

THIS APPLICATION MUST BE SIGNED Sign Here: _____

Applicant's Signature

Date