

SAYVILLE FERRY SERVICE

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

(Please print clearly)

Last Name:		First Name:	····	MI:	
Address:		····			
Home Phone:		Cell Phone:			
Email:					
Are you at least 18 years old?		Have you been convicted of	a felony?	□ Yes	□ No
If no, do you have a work permit?		If yes, explain?			
Are you a citizen of the United States?					
If no, are you authorized to work in the	US? Ves No	Do you have any nautical ex	perience?	□ Yes	□ No
Do you have a driver's license?	□ Yes □ No	If yes, explain?			
Has it ever been suspended or revoked?	□ Yes □ No				
Type of Employment: Deckhand	□ Captain □ C	ashier Other:			
	AVAILA	BILITY			
What date are you avai	able to start work?				
	ner (through Labor Day)?				
Will you be available to	ng and/or fall?	□ Yes □ No			
Will you be available to	or nights?	□ Yes □ No			
Do you have any comm	pact your summer availability	? Yes No			
•		ns, camp, etc.)			
-	(i.e. vacation	ns, camp, etc.)			
	STUDEN	TS ONLY			
Current School Attendi	ng:				
Current Grade/Class:		□ Sophomore □ Junior			
Expected Graduation D	ate (month and year)	:			
Next School Attending (if applicable):					
	САРТАІ	NS ONLY			
	CALIAL	NS ONLI			
License Class:	Tonnage:				
	Port:				
Vaters: Restrictions:					
F.C.C. Lic	ense #:	·····	_		

PERSONAL OR BUSINESS REFERENCES

(If you are a student, one reference must be a teacher.)

Name:	Relationship to Applicant:Address:		
Phone:			
Name:			
Phone:			
RECOI	RD OF EMPLOYMENT		
Previous Employer:			
Address:			
Supervisor's Name:			
Job Title:			
Your Responsibilities:			
EXPER	IENCES & INTERESTS		
	e which is relevant to working at Sayville Ferry Service, Inc.:		
I acknowledge and certify to Sayville Ferry Service	ON & ACKNOWLEDGEMENT e, Inc. that (1) the above information is all true and accurate and contains no		
	yment is "at will" and may be terminated by Sayville Ferry Service, Inc. for any bloyed I will abide by the rules and regulations of Sayville Ferry Service, Inc.		
chemical testing (known as Drug Testing) of captain employed; and that testing will also take place after	mpose requirements regarding drug and alcohol use and testing, and that ns, deckhands, and those in sensitive positions must take place prior to me being r my employment. I understand that if I am employed this testing is a condition cooperate with these laws, regulations, and requirements.		
	nts to contact my references, prior employers, schools and others to investigate d qualifications without notifying me before doing so.		
the undersigned, appear while an employee in any a	Ferry Service, Inc. to copyright or publish all photographs and/or in which, I, and all of its programs. I further agree that Sayville Ferry Service, Inc. may s for any and all public displays, publications, commercials, art, and advertising		
I acknowledge that no person may waive the terms	or requirements of this application.		
Signature of Applicant	Date		
Signature of Parent or Guardian (if under 18 years of age)	Date		