

Personal Information

First Name	Last Name
Social Security Number	Date of Birth
Physical Address	City/State/Zip
Mailing Address (if different)	City/State/Zip
Phone	Email Address
Have you ever used another name or SSN? YES NO	If YES, please explain:
Are you a U.S. Citizen or Alien authorized to work in the United States?	YES NO
Driver's License Number: State:	Any license restrictions? YES NO
Do you currently have any relatives work for Louisiana International Marine Inc.? YES NO	Position applying for: Date Available:

Documentation Information

USCG License #: Expiration: Date of first issue:	Z Card Expiration Date:
Merchant Seaman's Rating:	ID Number:

Employment History (Most recent listed first)

Employer Name:	Start Date:
	End Date:
Street/City/State/Zip:	Contact:
Phone:	



Leaving Salary:	Reason for leaving:
Employer Name:	Start Date:
	End Date:
Street/City/State/Zip:	Contact:
Phone:	
Leaving Salary:	Reason for leaving:
Employer Name:	Start Date:
	End Date:
Street/City/State/Zip:	Contact:
Phone:	
Leaving Salary:	Reason for leaving:

Education

High School:	City/State:
Years Attended:	Did you graduate? YES NO
Trade/Business/College:	City/State:
Years Attended:	Did you graduate? YES NO

U.S. Military History

Branch:	Present Membership in National Guard or Reserves?
Rank:	YES
	NO

Acknowledgment

Are you willing to submit to a drug screen?	Will you abide by LIM safety rules?
YES	YES
NO	NO
If injured, will you accept the medical facilities recommended by	Have you ever been convicted of a felony?
Louisiana International Marine, LLC?	YES
YES	NO
NO	If yes, explain:



Emergency Contact

Name:	Address:
Relationship:	Phone:

Please read the following carefully:

I declare that the answers to the questions in this application are correct and acknowledge that misstatement of fact or omission will be cause for dismissal or rejection. I authorize Louisiana International Marine, LLC to contact any of my previous employers as well as any reference source in order to verify the facts and information I have furnished regarding my qualifications and character. I hereby authorize any person(s) having knowledge thereof to provide such information to Louisiana International Marine, LLC, and I hereby release from liability and agree to hold harmless any person that furnishes such information in good faith. I agree that I will submit to a urinalysis, breathalyzer, and/or blood test requested by Louisiana International Marine, LLC as a condition of my employment. I authorized Louisiana International Marine, LLC to supply my employment record in whole or part and in confidence to any employer, insurance agency, or other party with a legal and proper interest, and I hereby release Louisiana International Marine, LLC from any liability and agree to hold harmless any employee of Louisiana International Marine, LLC who furnishes such information. I further understand that my employment is for no fixed time and may be discontinued with or without cause or notice by myself or Louisiana International Marine, LLC. I understand that no employee or officer or agent of Louisiana International Marine, LLC may bind it by oral or printed statements, including handbooks, benefit books, or bulletins, contrary to the above. Finally, I understand that no unauthorized alcohol, drugs, or firearms are permitted on company premises, and that either being under the influence of illicit drugs or having identifiable traces of them in my system during working hours is strictly prohibited. If medication is prescribed by a doctor, I am required to notify management, in writing of the specific medical problem and the exact drug that has been prescribed, immediately upon reporting to work.

Notice: Louisiana International Marine, LLC has a policy prohibiting the possession, distribution, use, consumption or being under the influence of illegal or unauthorized alcohol or drugs (synthetics, designers, etc.) and other harmful substances in order to provide a safe and healthful environment for the firm's employees, visitors and other personnel. You will be dropped from consideration of employment with Louisiana International Marine, LLC if the results of your urine sample drug screen indicate that you are applying for a job while you are using any of the above-mentioned illegal or unauthorized substances.

Vessel Applications Only: The United States Coast Guard will be notified of all licensed personnel testing positive in the drug screen. (The application may choose to have a second set of tests performed on the same positive urine sample; however, the second test must be paid for by the applicant and requested in writing within 24 hours after being disqualified.)

Under provisions of the Fair Credit Reporting Act, 15 U.S.C. Sec. 1681, et seq. Notice is hereby given that a consumer report or investigative consumer report may be made which may include information as to your credit worthiness, character, general reputation, personal characteristics, and mode of living, which will be used for employment purposes. An investigation into your workers' compensation or industrial accident background may also be conducted.

You are further advised that, under the Act, any person who procures or causes preparation of an investigative consumer report or any consumer shall, upon written request made by the consumer within a reasonable time after receipt of the disclosure required by subsection 1681(d), make a complete and accurate disclosure of the nature and scope of the investigation requested. This disclosure shall be made in writing, mailed or otherwise delivered, to the consumer not later than 5 days after on which such request was received from the consumer or such report was first requested, whichever is the latter.

You are further advised that if you are denied employment, either wholly or partly because of information contained in a consumer report as that term is defined in the Fair Credit Reporting Act that a disclosure will be made to you of the name and address of the consumer reporting agency making such report.

If you have any questions whatsoever about the information of this application form you should ask a Louisiana International Marine, LLC representative now, before signing it.



I have carefully read the information on this form, and realize I had the opportunity to ask questions about it, and understand what it means.

I hereby certify that the questions on this application have been answered truthfully and understand that any false representation will result in discharge.

Please be certain you have filled out this application completely, as incomplete applications will not be considered.

Enter your first and last initials (without spaces) to confirm you acknowledge the above terms:	
Enter your mist and last mitials (without spaces) to commin you acknowledge the above terms.	