

# EMPLOYMENT APPLICATION

Name					
	Last	First	Middle or Maiden		
Present Address					
	Street	City	State	Zip	
Permanent Address					
	Street	City	State	Zip	
Phone #					
Email		Referred by			
Former Employee of	Blockade Runner?	If yes, date of last employr	ment		
Desired Department		Desired Position	Desired Position		

# EDUCATIONAL AND PROFESSIONAL TRAINING

Level	School	State	Diploma/Degree	Field of Study	Graduation Year
Graduate					
College					
High School					

Special Certifications or Licenses \_

## WORK EXPERIENCE (Please complete below or submit resume)

Employer	Started (M/Y)	_ Left (M/Y)
Address	Position	Salary
Reason For Leaving	Main Duties	
Supervisor	_ May We Contact this Employer?	
Name & Title		If yes, provide phone number
Employer	Started (M/Y)	_ Left (M/Y)
Address	Position	Salary
Reason For Leaving	Main Duties	
Supervisor	May We Contact this Employer?	
Name & Title		If yes, provide phone number
Employer	Started (M/Y)	_Left (M/Y)
Address	Position	Salary
Reason For Leaving	Main Duties	
Supervisor	May We Contact this Employer?	
Name & Title		If yes, provide phone number

#### SCHEDULE

Date Available to Start

It is required that you are available to work holidays and weekends. Please let us know your availablity.

## School or Constant Commitment Schedule

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

### Upcoming Schedule Requests

Today's Date	Requested Days Off	Reason

#### References

Name	Contact #	Tiltle	Organization

#### BACKGROUND

Have you ever been convicted of a violation of law other than minor traffic violations? YES NO Have you ever been discharged or requested to resign from a former position? YES NO				
Are you a US Citizen or Permanent Resident? YES	_ NO			
If not, state your immigration status	Work Permit Number	Expiration		
Blockade Runner is an Equal Opportunity Employer and sex, religion, age, or disability in the admission or acces Reasonable accomodations upon request. My signature and information below authorizes the Bloc formation in connection with my application for employr	s to, and participation and employment in, it kade Runner to conduct a background inve nent. This investigation may include such inf	ts programs, services, or activities. stigation and authorizes release of in- formation as criminal or civil convictions,		
driving records, previous employers and educational ins appropriate sources. I waive my right of access to any s reference source from any liability in connection with its as follows: the local law enforcement agency, informatio tions or certification that no data on criminal convictions	such information, and without limitation herel release or use. This release includes the soun n from the Central Criminal Records Exchar	by release the Blockade Runner and the urces cited above and specific examples		
Furthermore, I certify that I have made true, correct and	complete answers and statements on this s	application in the knowledge that they		

Furthermore, I certify that I have made true, correct and complete answers and statements on this application in the knowledge that they may be relied upon in considering my applications, and I understand that any omission or falsification of any part of this application or any supplement to it will be sufficient grounds for failure to employ or for my discharge should I become employed with the Blockade Runner.

Social Security #	Date of Birth
Drivers License #	State Issued
Signature	Today's Date

Due to limited parking on the island, we ask all employees to participate in our company carpooling system from March 1- Oct. 31. This ensures ample parking for our guests throughout the peak seasons.