



Application for employment

Wendella is an equal opportunity employer.

Date:

Name (last name first)		Social Security Number	
Present Address		City	State
			Zip Code
Permanent Address		City	State
			Zip Code
Home Phone:	Email Address		Referred By
Cell Phone:			Over 21 Y/N

Position Desired	Date you can start	Salary desired
Are you employed?	If so, may we inquire of your present employer?	
Ever Applied to this company before?	Where?	When?

List any marine experience or licenses.

Former Employers – Starting with the most recent

Date, Month and Year	Name & Address of Employer	Salary & Phone #	Position	Reason For Leaving
From				
To				
From				
To				
From				
To				
From				
To				

Continued on Other Side

Education

Name and Location	Years Completed	Did You Graduate	Course of Study
College			
High School			
Other			

References

Name	Address/Phone Number	Business	Years Known

Authorization – Please read before signing.

“I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damages that may result from utilization of such information.

I also understand and agree that no representative of Wendella has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized Wendella representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the American With Disabilities Act (ADA) and other relevant federal and state laws.”

In consideration of my possible employment, I hereby consent to submit to alcohol and drug tests as may be required by the Wendella, The United States Coast Guard or any other applicable regulatory agency.

Date	Signature
Interviewed By	Date

Do Not Write Below This Line