

# Application For Employment

Rev Mar 8 2010

Fax# (907) 247-7200

**ALASKA SHIP & DRYDOCK, INC.**

Main Office# (907) 225-7199

Alaska Ship & Drydock, Inc. considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.  
***Alaska Ship & Drydock, Inc., is an Equal Opportunity Employer. We encourage minorities and women to apply.***

**INCOMPLETE APPLICATIONS WILL BE REJECTED**

PLEASE PRINT

POSITION(S) APPLIED FOR:	DATE OF APPLICATION	
HOW DID YOU LEARN ABOUT US?		
<input type="checkbox"/> ADVERTISEMENT	<input type="checkbox"/> FRIEND	<input type="checkbox"/> WALK-IN
<input type="checkbox"/> EMPLOYMENT AGENCY	<input type="checkbox"/> RELATIVE	<input type="checkbox"/> OTHER _____

LAST NAME	FIRST NAME	MIDDLE NAME	
ADDRESS	CITY	STATE	ZIP CODE
TELEPHONE NUMBER(S)	SOCIAL SECURITY NUMBER		

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes\_\_\_\_\_ No\_\_\_\_\_

We require pre-employment drug screening. Do you: Accept\_\_ Refuse\_\_

Have you ever filed an application with us before? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, give date \_\_\_\_\_

Have you ever been employed with us before? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, give date \_\_\_\_\_

Are you currently employed? Yes\_\_\_\_\_ No\_\_\_\_\_

May we contact your present employer? Yes\_\_\_\_\_ No\_\_\_\_\_

Are you prevented from lawful employment in this country because of Visa or Immigration Status? Yes\_\_\_\_\_ No\_\_\_\_\_

*Proof of citizenship or immigration status will be required upon employment.*

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full Time  Part Time  Shift Work  Temporary

*Check all that apply.*

Are you currently on "lay-off" status and subject to recall? Yes\_\_\_\_\_ No\_\_\_\_\_

Can you travel if a job requires it? Yes\_\_\_\_\_ No\_\_\_\_\_

Have you been convicted of a felony within the last 7 years? Yes\_\_\_\_\_ No\_\_\_\_\_

*Convictions will not necessarily disqualify an applicant from employment.*

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Job-Related Skills

Attach copies of certifications held.

Production (mark with months/years of experience)

## General:

CPR/1st Aid       Concrete       Enclosed Spaces OK       Heights OK  
 Insulation       Labor       Nights       QA

## Boat/Shipyard:

Block Building       Drydock Operation       Firewatch       Joiner  
 Line-handling       USCG License (Specify Type \_\_\_\_\_)       Ventilation & Duct Cleaning

## Coatings:

Airless Pump       Blasting       Conventional Pot       Critical Coat  
 Finish Work       Power Tool Prep       SSPC Standards       Tank Blasting

## Electrical:

Calibrating       Pulling Cable       Phone Instalation       Read Blueprints  
 Testing Systems       Use Test Meters       Wiring 480, 3 Ph       Troubleshoot Marine Elect.

## Equipment Operation:

CDL       Crane (specify sizes)       Forklift       Loader  
 Manlift       Rigging       Scissorlift       Z-90

## Fitting:

Pipe       Structural       Aluminum       Stainless Steel

## Hazmat:

Asbestos Awareness       Asbestos 40-Hour       Hazwop       Lead Abatement  
 Storage & Shipping

## Mechanical:

Assembly       Hydraulic Line Install       Installing Clock Fast       Line Boring  
 Machinist       Marine Mechanical       Precision Parts       Refrigeration  
 Shaft Alignment

## Welding:

Pipe       Structural       Aluminum       Stainless Steel  
 Braze       FCAW-G       GMAW       GMAW-G  
 GTAW       MIG       Plasma       SAW  
 SMAW       Sub Arc       TIG       Fit Up Procedures

List any physical position you can not weld in: \_\_\_\_\_

## Administration

### Computer:

Access       Excel       Outlook       Power Point  
 Project       Word      Words/Minute \_\_\_\_\_      Other \_\_\_\_\_

### Graphics/Engineering:

Adobe       Autocad       Rhino       Ship Constructor

### Other:

### Languages

List any languages known. Make sure to indicate if you can speak, read, and/or write them.

Fluent: \_\_\_\_\_

Good: \_\_\_\_\_

Fair: \_\_\_\_\_

## Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer:		Dates Employed		Work Performed
		From:	To:	
Address:				
Phone Number(s):		Hourly Rate/Salary		
		Starting:	Final:	
Job Title:	Supervisor:			
Reason for Leaving:				

Employer:		Dates Employed		Work Performed
		From:	To:	
Address:				
Phone Number(s):		Hourly Rate/Salary		
		Starting:	Final:	
Job Title:	Supervisor:			
Reason for Leaving:				

Employer:		Dates Employed		Work Performed
		From:	To:	
Address:				
Phone Number(s):		Hourly Rate/Salary		
		Starting:	Final:	
Job Title:	Supervisor:			
Reason for Leaving:				

Employer:		Dates Employed		Work Performed
		From:	To:	
Address:				
Phone Number(s):		Hourly Rate/Salary		
		Starting:	Final:	
Job Title:	Supervisor:			
Reason for Leaving:				

If you need additional space, please continue on a separate sheet of paper.

# Employment Experience, Continued

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**List any professional, trade, business or civic activities and offices held:**

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*


**Describe any job-related training received in the United States Military:**


**List any other skills or information that you feel may be helpful to us in considering your application:**


**References:**

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**1.**

Name	Relationship to Applicant
( )	
Phone Number	
Address	

**2.**

Name	Relationship to Applicant
( )	
Phone Number	
Address	

**3.**

Name	Relationship to Applicant
( )	
Phone Number	
Address	

**4.**

Name	Relationship to Applicant
( )	
Phone Number	
Address	

# Education

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**Graduate/Professional:**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Years Completed: \_\_\_\_\_

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**Undergraduate:**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Years Completed: \_\_\_\_\_

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**Trade School:**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Years Completed: \_\_\_\_\_

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**High School:**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Years Completed: \_\_\_\_\_

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**Elementary School:**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Years Completed: \_\_\_\_\_

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**Other (Specify):**

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

Course of Study: \_\_\_\_\_

Years Completed: \_\_\_\_\_

**List any specialized training, apprenticeships, and extra-curricular activities not covered in the above:**


## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

**I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.**

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities in such a job or occupation is attached.

Yes\_\_\_\_\_ No\_\_\_\_\_

### **Applicants Holding a CDL ONLY:**

In accordance with the provisions of Sections 604(b)(2)(A) to the Fair Credit Reporting Act, Public Law 91-508, as ammended by the Consumer Credit Reporting Act of 1996 (Title II, Subtitle D, Chapter I, of Public Law 104-208), you are being informed that reports verifying your previous employment, previous drug and alcohol test results, and your driving record will be obtained on you for employment purposes. These reports are required by Sections 382.413, 391.23, and 391.25 of the Motor Carrier Safety Regulations. By signing below you are authorizing all previous employers and agencies to release the above referenced information to our company. \_\_\_\_\_.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Witness printed Name