

## DAVIS PARK FERRY COMPANY, INC. SEASONAL EMPLOYMENT APPLICATION

P.O. BOX 998

PATCHOGUE, NY 11772

(631) 475-1665

DAVISPARKFERRY@GMAIL.COM

Name:			DOB:	/		
Full Address:						
Home Phone #:		Cell Phone #:				
E-mail address:						
EMPLOYMENT DESIRE	<b>D</b> : (Pleas	se Check Oneif you are unde	cided, please indicate	e your first choice)		
1) *Captain	0	*please provide copies of the foll	owing: USCG license, FCC l	icense and TWIC Card		
2) **Deckhand	0	**USCG regulations require you	be at least <u><b>16</b></u> years of age	to work on the boat		
3) Cashier	0					
4) Baggage Handler						
Salary Desired:						
If you are <b>under the age</b>	e of 18 <sub>]</sub>	please provide the name	of your parent/g	uardian:		
Name			Relationship			
Street Add	dress	City	State			
If you are <b>under 18</b> , do y	you hav	□ YES	□ NO			
If yes, please attach a	a <u>copy</u> to	this application. If no, please	be aware that in ord	er to be employed you		
must obtain working	g papers t	through your school district a	nd provide us with t	he original for the		
duration of your emp	oloyment	with us.				
Do you drive? □ Y	ES	$\square$ NO				

EDUCATION:	Name of School		<u>Dates Attended</u>		<u>Grade Average</u>	
High School _						
College _						
CPR Certificate:	□ YES	□ NO	First Ai	d Certificate:	□ YES □ NO	
Do you have any	marine rela	ted experien	ce? □ YE	S • NO		
If yes, please expl	lain:					
FORMER EMPLO	VMENT.					
Please list your last t		rs.	1			
Name & Ad	dress	Salary Start	Salary End	Reaso	on for Leaving	
Are you currently	y employed?	•	□ YES	□ NO		
REFERENCES:						
Please list the names		le <b>not related</b> t		ou have know for a		
Name			Address		Phone Number	
		1		-		
		DR	UG POLICY			
Federal Law 4	46 CFR pg. 470			mployment and ra	<u>ındom</u> drug testing.	
	DATE					