

APPLICATION FOR EMPLOYMENT

PROJECT OCEANOLOGY

Equal Opportunity Employer

It is the policy of Project Oceanology to provide equal opportunity without regard to race, color, sex, religion, creed, national origin, ancestry, age, marital status, sexual orientation, political affiliation or because the employee is a veteran or a qualified individual with a disability. All questions must be answered and application signed.

Last Name			First			Middle			Date		
Street Address						Home Phone () -					
E-Mail Address						Mobile/Cell Phone () -					
City, State, Zip						Beeper Number () -					
Have you ever worked for Project Oceanology? ____ Yes ____ No						Business Phone () -					
If Yes, indicate your dates of employment and your reasons for leaving employment:						Social Security Number					
Position Desired						Pay Expected					
Can you furnish proof of your right to work in the U.S.A. ____ Yes ____ No											
When will you be available to begin work?											
When is the best time to reach you?						May we contact you at work?					
Driver's License Number:						Have you ever been bonded?					
Are you under 18 years of age? ____ Yes ____ No											
If "yes", state your date of birth - mo. ____ day ____ yr. ____											
Can you furnish a Statement of Age/Working Paper as appropriate? ____ Yes ____ No											
If hired, is there anything which would prevent you from reporting to work each day on time to perform your job duties?											
Hours Available	Sun	Mon	Tue	Wed	Thu	Fri	Sat				
From											
To											

Total Hours Available per Week: _____

Would you work: ____ Full-Time ____ Part-Time ____ Seasonal ____ Temporary

Are you willing to work overtime, when and as required? ____ Yes ____ No

Are you willing to Relocate? ____ Yes ____ No Are you willing /able to Travel? ____ Yes ____ No

Please be advised that smoking shall be prohibited on all Project Oceanology vessels, in all Project Oceanology buildings, rented space used by employees, and any Project Oceanology-owned vehicles at any time.

Educational Background

School	Name and location of School	Grade Point Average or Class Rank	Course of Study	Number of Years Completed	Did You Graduate	Degree or Diploma
High School					Yes ___ No ___	
College					Yes ___ No ___	
Other Education					Yes ___ No ___	

Are you going to school now? _____ Yes _____ No Where _____
 _____ Day Classes _____ Night Classes

Employment History

Project Oceanology reserves the right to contact prior and current employers. Please give accurate, complete, full-time and part-time employment record. Start with your present or most recent employer. Include military experience if applicable. Do not indicate "see resume."

1 Company Name and Mailing Address	Phone () -
Job Title and Name of Supervisor	Employed (Month and Year) From To
Describe your work	Weekly Pay Start End
Reason for Leaving	
2 Company Name and Mailing Address	Phone () -
Job Title and Name of Supervisor	Employed (Month and Year) From To
Describe your work	Weekly Pay Start End

6 Please indicate any other relevant training and/or experience you have that is not listed above.

7 Please list any relevant professional association and any offices held.

DISCLOSURE AND ACKNOWLEDGMENT OF INTENT TO CONDUCT DRUG TEST

Please be advised that prior to making a decision regarding your hire, Project Oceanology intends to conduct a urinalysis drug test as part of the application process. This notice is given and the urinalysis drug test will be conducted in accordance with Connecticut General Statutes §§ 31- 51u et seq. The urinalysis drug test will be performed using a reliable methodology. A positive test result will be confirmed by a second urinalysis drug test, which is separate and independent from the initial test, utilizing a gas chromatography and mass spectrometry methodology or a methodology which has been determined by the Commissioner of Public Health to be as reliable or more reliable than the gas chromatography and mass spectrometry methodology. You will be given a copy of any positive urinalysis drug test result. The results of any such test shall be confidential and shall not be disclosed by the employer or its employees to any person other than any such employee to whom such disclosure is necessary; the results shall be maintained along with other employee medical records and shall be subject to the privacy protections provided for in Connecticut General Statutes §§ 31-128a to 31-128h, inclusive. Such results shall be inadmissible in any criminal proceeding.

I certify by my signature below that I have read and reviewed the “Disclosure of Intent to Conduct Drug Test,” and I understand that I may be required to submit to a drug test as part of the application process.

Date: _____

Signature: _____

Printed Name: _____

**DISCLOSURE AND ACKNOWLEDGMENT REGARDING
CRIMINAL HISTORY CONVICTION INFORMATION REQUEST**

Have you ever been convicted of a crime* (with regard to motor vehicles, include only felony convictions)? If yes, please give charge, location, court date and describe in full.

I certify by my signature below that I understand that if I am offered and accept employment, a criminal history conviction information request shall be submitted to confirm the conviction information I have provided in this application.

Date: _____ Signature: _____

Printed Name: _____

*Note: The applicant is not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Sections 46b-146, 54-760 or 54-142a.

These criminal records subject to erasure pertain to a finding of delinquency or a child's being a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty, or a conviction for which the person received an absolute pardon.

Any person whose criminal records have been erased pursuant to these rules shall not have been considered arrested within the meaning of the Connecticut General Statutes with respect to the erased proceedings and may so swear under oath.

Conviction of a crime will not necessarily disqualify you from the job for which you are applying.

**DISCLOSURE AND ACKNOWLEDGMENT REGARDING PROOF OF
AUTHORIZATION TO WORK IN THE UNITED STATES**

I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment. I certify by my signature below that I understand that an offer of employment and my continued employment are contingent upon satisfactory proof of my authorization to work in the United States.

Date: _____

Signature: _____

Printed Name: _____

**DISCLOSURE AND ACKNOWLEDGMENT REGARDING
DRIVING HISTORY INFORMATION REQUEST**

I certify by my signature below that I understand that if I am offered and accept employment, a driving history information request shall be submitted.

Date: _____

Signature: _____

Printed Name: _____

**DISCLOSURE AND ACKNOWLEDGMENT REGARDING
AUTHORIZATION TO CONTACT PRIOR AND CURRENT EMPLOYERS**

In processing your application for employment and/or in evaluating you for hire, promotion, continuation or retention in employment, or other employment related purposes, Project Oceanology may obtain information about you from a prior or current Employer.

By signing this notice you are acknowledging receipt and review of this disclosure.

By signing this notice you are also authorizing Project Oceanology or its affiliates or agents to obtain information/opinions about you, from prior or current employers, at any time prior to or during your employment with Project Oceanology or its affiliates or agents for purposes of evaluating you for hire, promotion, continuation or retention in employment or any other permissible employment related purposes.

Date: _____

Signature: _____

Printed Name: _____

(A photocopy of this authorization is to be accepted as an original.)

**DISCLOSURE OF RIGHTS UNDER THE FAIR CREDIT REPORTING ACT AND
AUTHORIZATION TO OBTAIN CREDIT OR CONSUMER INFORMATION**

In processing your application for employment and/or in evaluating you for hire, promotion, continuation or retention in employment, or other employment related purposes, Project Oceanology may seek credit and/or consumer information about you from a credit reporting agency (CRA) or other sources. This may include Project Oceanology or its affiliates or agents requesting information about your character, general reputation, personal characteristics or mode of living, obtained through personal interviews with neighbors, friends, associates or acquaintances of the consumer. A report containing such information is defined by the Federal Trade Commission as an “investigative consumer report.”

By signing this notice you are also authorizing Project Oceanology or its affiliates or agents to obtain credit or consumer information about you, including an investigative consumer report, at any time prior to or during your employment with Project Oceanology or its affiliates or agents for purposes of evaluating you for hire, promotion, continuation or retention in employment or any other permissible employment related purposes.

Date: _____

Signature: _____

Printed Name: _____

Signature

I certify that the information given herein is true and complete to the best of my knowledge.

I understand that this application will be active for a period of 60 days; after that time, if I wish to be considered for employment, I must submit a new application.

I authorize you to make such investigations and inquiries of the information provided herein, and other matters that relate hereto, as may be necessary. I hereby release employers, schools and other persons, institutions and businesses from all liability in responding to inquiries in connection with my application. I understand that if I am offered and accept a position, a criminal history conviction information shall be submitted by Project Oceanology to confirm the conviction information I have provided in this application. I understand that false or misleading information given in my application or during my interviews may result in a refusal to hire, or discharge in the event of employment. I understand and agree that, if hired, my employment is at will. I also understand that if I am hired my employment is for no definite period of time. I may terminate my employment at any time and I may be dismissed at any time without prior notice. I further understand and agree that nothing in this application form shall constitute a contract of employment or shall constitute a contract or a guarantee of employment.

I also understand that any policies or procedures implemented by Project Oceanology in the event of my employment are for purposes of operations only and are not intended to be nor constitute a contract for my employment. In addition, I understand that any of these policies or procedures may be changed at any time at the employer's discretion and without notice.

Signature

Date

(A photocopy of this authorization is to be accepted as an original.)

PROCESSING RECORD

Notes:

Position Offered:

Accepted:

Refused:

Confirmation Letter Sent: