



SUBMAR, INC.

805 Dunn Street • Houma, Louisiana 70360

Phone: 985-868-0001 • Fax: 985-851-0108

web: www.submar.com

email: submar@submar.com

APPLICATION FOR EMPLOYMENT

This application will be active and valid for 90 days only.

A new application must be completed to maintain an active status.

We consider 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.

(PLEASE PRINT)

Position(s) applied for:			Date of Application:		
How did you learn about us?					
Employee Referral _____		Want Ad _____		Walk-In _____	
Employment Agency _____		Relative _____		Other _____	
Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s)					

Are you at least 18 years of age? Yes _____ No _____

If you are not 18 years of age, can you provide required proof your eligibility to work? Yes _____ No _____

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 _____

If Yes, who was your supervisor? _____ What was your job title? _____

Are you currently employed? Yes _____ No _____

May we contact your present employer? Yes _____ No _____

Are you legally eligible for employment in the United States?
Proof of citizenship or immigration status will be required upon employment. Yes _____ No _____

On what date would you be available for work? _____

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

Do you have a reliable method of transportation to get work? Yes _____ No _____

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

If the answer is Yes, what is your recall date? _____

Submar Inc.
Application for Employment

Education

	Name and Address of School	Course of Study	Years Completed	Diploma
Elementary School				
High School				
Trade, Business or Correspondence				
Other (Specify)				

Special Skills (Operator Qualification, Forklift, Rigger, Hazmat Certifications, other)	

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			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)	Hourly Rate/Salary		
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Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone 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.

Submar Inc.
Application for Employment

State any additional information you feel may be helpful to us in considering your application. Be prepared to supply proof of certification.

___ I understand and agree that I may be required to take one or more of the following as a condition of hiring or continued employment: ___ Physical Examination ___ Drug Screen I agree to consent to take such test(s) at such time as designated by the Company and to release the Company, its directors, officers, agents or employees from any claim arising in connection with the use of such test(s). ___ Yes ___ No

References

1	_____ ()	
	(Name)	(Phone #)

	(Address)	
2	_____ ()	
	(Name)	(Phone #)

	(Address)	
3	_____ ()	
	(Name)	(Phone #)

	(Address)	

AUTHORIZATION

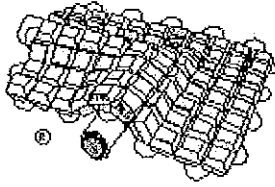
"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the company. I understand that no company representative, other than it's president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

DATE _____ SIGNATURE _____

FOR PERSONNEL DEPARTMENT USE ONLY

Employed	Yes _____	No _____	Date of Employment _____
Job Title	_____		Hourly Rate/Salary _____
Remarks:	_____		



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Request for Previous Employment Verification

Applicant Name (Please Print)

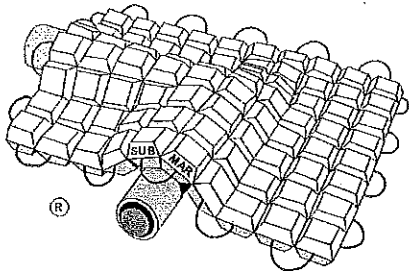
Social Security Number

I, _____, hereby authorize Submar, Inc. to request information regarding my employment history from my previous employer(s).

I, _____, hereby grant permission to you, my previous employer, to release and forward any information in regards to my employment with your company.

Applicant's Signature

Date



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Pre-Employment Agreement

To Whom It May Concern:

It is agreed and understood that I must take a Pre-Employment medical exam and drug screen test before being hired by Submar, Inc. I also understand that, once hired, I am subject to random drug testing at any time during my employment with Submar, Inc.

Date

Applicant's Signature

Print Name