

## APPLICATION FOR SEAGOING EMPLOYMENT

Applicant Inform	ation (Please use all capit	al letters)						
Family Name			First Name					
Permanent Address						Nearest I	nternational Airport	
Mobile Phone Number		Home Phone Num	ber		Email Address			
Position(s) Applied For:		How did you hear about this position?		How much notice is required by your current employer?				
Are you age 21 or older?		Do you have visible tattoos? (When wearing short sleeves and shorts)		Do you have any piercings? (Women other than one hole in each ear)				
Yes	No	Yes No Location(s):		):	Yes No Location(s):			
Do you have a current pass	oort?	Passport Number		Date Issued	Place Issued		Expiration Date	
Yes	No		i				·	
Do you have a Seaman's Bo	ok/ID Book?	Book/ID Number		Date Issued	Place Issued		Expiration Date	
Yes	No						·	
Do you have a USA Seaman	n's C1/D visa?	Visa Number		Date Issued	Place Issued		Expiration Date	
Yes	No							
List any languages spoken o	other than English and your flu	uency level:						
1								
2	Fluent	Conversational	Basic	4	Пы	uont -	Conversational Basic	
Have you been convicted or		Dasic	Basic 4 Fluent Conversational B  If yes, has the felony conviction been annulled, expunged, or sealed by a court?					
	Yes No		Yes No			•		
If yes, please describe in ful	l (provide additional informati	on on an attached p	iece of	paper, if necessary):				
,, p	4			Park 21, 11 11 22 22 22 17,1				
Have you previously applied to HAL?			Have you previously worked for another cruise line?					
Yes No						c iii c.		
		Yes No If Yes, which one(s)						
Education								
Level	Name of School	City, Sta	te, Coui	ntry	Degree Earned		Graduated	
High School							Yes No	
Business/ Trade School							Yes No	
College							Yes No	
Graduate Study							Yes No	
Other (Explain)							Yes No	



## APPLICATION FOR SEAGOING EMPLOYMENT (cont'd)

Employment History							
				, periods of unemployment. tion, paste on another piec			
Company Name	City, State, Country	Position	on	Dates (MM/YY to MM/YY)	Reason for Leaving	Reason for Leaving	
References							
May we contact your current employer for a reference?			Name	Company	Email		
Yes No If Yes, provide his/her information:			Title	Daytime Pho	ne		
May we contact your previous employer for a reference?			Name	Company	Email		
Yes No If Y	es, provide his/her informati	on:	Title	Daytime Pho	ne		
Please provide two addition	al references (even if you answe	red Yes	to either question above)				
Reference 1: Name			Email	Daytime Pho	ne		
Describe your connection to	the reference (include company	y and tit	tle if relevant)				
Reference 2: Name			Email	Daytime Pho	ne		
Describe your connection to	the reference (include company	y and tit	tle if relevant)				
Authorization							
background relevant to	possible employment, inc mpany to which I have app	luding	all statements made by r	ion, employment experienc ne on this form and any rele uch inquiry is directed from	ease supplement th	ereto. I also	
I further understand and agree that acceptance of this form does not constitute an employment agreement, and that if I am employed, my employment is for no definite period and may be terminated at will at any time without previous notice and with or without cause.							
I certify that the information herein is accurate and complete to the best of my knowledge and understand that any omission or misrepresentation of fact may be considered reason for disqualification or dismissal.							
Applicant Signature			Applicant Name (please print)			Date	



## APPLICATION FOR SEAGOING EMPLOYMENT (cont'd)

Marine and Technical Candidates Only								
Previous Sea Experience								
Rank	Dates (MM/YY to MM/YY)	Vessel Type	Gross Tonnage	Owner/Operator	Engine Type			
If previously employed at sea, list STCW 95 qualifications (i.e., Certificate of Competency/License/BST/PSCRB/CMHB)								
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	a, list STCW 95 qualifications (i	1	ency/License/BST/PSCRB/CMHB					
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Date Issued		Certificate Type	ency/License/BST/PSCRB/CMHB					
Date Issued  If you have the following cer	tifications, please list if applica	Certificate Type						
Date Issued	tifications, please list if applica	Certificate Type	ency/License/BST/PSCRB/CMHB					