



EMPLOYMENT APPLICATION

36 Clermont Drive Clermont, NJ,08210

Location applying for: _____

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, creed, color, national origin, sex, age, disability, marital status, sexual orientation or citizenship status in all employment decisions.

Date of Application _____

Position(s) Applied for _____

Name _____ SS # _____
Last First Middle

Telephone # _____ TWIC Holder Yes No

Current Address _____
Street

City State Zip Code How long? _____

Previous Addresses

Street City State Zip Code How long? _____
years/months

Street City State Zip Code How long? _____
years/months

Street City State Zip Code How long? _____
years/months

Have you ever worked for Northstar or any of its subsidiaries before? Yes No

If so please check which company? Boat World River Services

Position _____ Dates From _____ To _____

Reason for Leaving _____

Are you now employed? _____ If not, how long since leaving last position? _____

Who referred you? _____

Are you legally eligible for employment in this country? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Are you under age 18? Yes No

NOTE: We Participate in E-Verify. We will provide the Social Security Administration and, if necessary, the Department of Homeland Security with information from each new employee's Form I-9 to confirm work authorization. If the Government cannot confirm that you are authorized to work, we are required to provide you with written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Experience and Qualifications

Accident History

If no accidents in the last 3 years – check here

Dates	Nature of Accident	Fatalities	Injuries	Haz Mat Spill
Last Accident				<input type="checkbox"/> Yes <input type="checkbox"/> No
Previous				<input type="checkbox"/> Yes <input type="checkbox"/> No
Prior				<input type="checkbox"/> Yes <input type="checkbox"/> No

Traffic Convictions & Forfeitures past 3 years (other than parking violations)

If no traffic convictions and/or forfeitures in the last 3 years – check here

Date Convicted (month/year)	Violation	State of Violation	Penalty (Forfeited bond, collateral and/or points)

License Information

Section 383.21 FMCSR states “No person who operates a commercial motor vehicle shall at any time have more than one driver’s license”. I certify that I do not have more than one motor vehicle license, the information for which is listed below.

_____ State _____
_____ License Number _____
_____ Expiration Date _____

Date of Birth: _____

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No
 Has any license, permit or privilege ever been suspended or revoked? Yes No

If you answered yes, give details _____

Driving Experience:

If no driving experience in the last 3 years – check here

Class of Equipment	Yes	No	Circle Type	Dates	Approximate Miles
Straight Truck			Van Tank Dump Reefer		
Tractor/Semi trailer			Van Tank Dump Reefer		
Tractor-two trailers			Van Tank Dump Reefer		
Motor coach/Bus			8+ Passengers or over 15		

List states operated in for last five years: _____

List special courses, training or safety awards: _____

List any trucking, transportation or other experience that may help you in obtaining work with this company: _____

EMPLOYMENT HISTORY – All applicants wishing to drive in interstate commerce must provide the following information on all employers during the preceding three years. You must give the same information for all employers for whom you have driven a commercial vehicle seven years prior to the initial three years (total of ten year employment record). **You are required to list the complete mailing address: street number and name, city, state and zip code.** **Print & List Most Recent Employer First!**

Employer Name _____ Phone # _____

Street _____

City _____ State _____ Zip Code _____

Position Held _____ Reason for Leaving _____

Held From (mm/yy) _____ To (mm/yy) _____

Were you subject to the Federal Motor Carrier Regs while employed? Yes No

Was your job designated a safety sensitive function in any DOT regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

*ACCOUNT FOR PERIOD BETWEEN JOBS - Include dates (month/year) and reason _____

Employer Name _____ Phone # _____

Street _____

City _____ State _____ Zip Code _____

Position Held _____ Reason for Leaving _____

Held From (mm/yy) _____ To (mm/yy) _____

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Was your job designated a safety sensitive function in any DOT regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

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Employer Name _____ Phone # _____

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Street _____

City _____ State _____ Zip Code _____

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Held From (mm/yy) _____ To (mm/yy) _____

Were you subject to the Federal Motor Carrier Regs while employed? Yes No

Was your job designated a safety sensitive function in any DOT regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

*ACCOUNT FOR PERIOD BETWEEN JOBS - Include dates (month/year) and reason _____

TO BE READ AND SIGNED BY APPLICANT

I authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.) I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application.

"I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigating my safety performance history as required by 49 CFR 391.23(d) and (e). I understand that I have the right to:

- Review information provided by current/previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information."

APPLICANT STATEMENT – I certify that all information I have provided in order to apply for and secure work with Northstar Marine Inc. is true, complete and correct. I am aware that I am applying for work for a company involved in Hazardous and Non Hazardous removal and transportation. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application or immediately discharge me from the employer's service whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal or professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about my background to Northstar Marine Inc..

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing an applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and complete a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an employment agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer president.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read and fully understand and accept all terms of the foregoing Applicant Statement and certify that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature of Applicant _____ Date _____