

APPLICATION FOR EMPLOYMENT

4325 France Road New Orleans, LA 70126

APPLICANT'S STATEMENT

Only Fill Out Information Requested — Additional Information Will Void Application.

I declare that my answers to the questions on this application are true and complete. I understand that any unanswered questions may cause my application to be rejected, and if I leave out important facts about my background or make any false or misleading statements on this application, other paperwork or during interviews, I may not be hired or I may be terminated if Gulf Coast Shipyard Group, Inc. finds out later. I give permission to my past employers, schools and personal references to give Gulf Coast Shipyard Group, Inc. any and all information about my work habits, education, training and character. I release all persons from all liability and agree not to sue anyone for any damages that may happen from giving or using this information.

confirm that I have seen a description of the major job duties and physical requirements of the job I am applying for, and I understand that my application will be considered only for this specific job. I acknowledge that any job offer is not final unless I pass Gulf Coast Shipyard Group, Inc. drug/alcohol test, job related physical exam and prior employment check.

If hired, I agree to learn and follow all company rules, policies and practices, and to follow my supervisors' lawful orders and instructions. I will use and wear all safety items required by Gulf Coast Shipyard Group, Inc. and will be careful in my work not to expose myself or fellow workers to unnecessary dangers. I will submit to drug/alcohol tests and medical exams by a doctor chosen by Gulf Coast Shipyard Group, Inc. at any time asked, and I will submit to such exams before making any claim against Gulf Coast Shipyard Group, Inc. for injury or illness which occurred at work. I give permission to all medical care providers to give Gulf Coast Shipyard Group, Inc. any and all medical information about my work injury or illness. I will also cooperate in any Gulf Coast Shipyard Group, Inc. investigation by giving true and complete answers to all questions. I understand that Gulf Coast Shipyard Group, Inc. may add, change or stop using any published or unpublished rules, policies and prior practices at any time. I understand that my employment is at will and either party may terminate the employment relationship at any time.

I agree not to give out any of Gulf Coast Shipyard Group, Inc. trade secrets, or any information about the company without permission, and I agree not to do things in conflict with the interests of Gulf Coast Shipyard Group, Inc.

I certify that I have read this Applicant's Statement in full, that it has been explained to me to my satisfaction, and that I understand and fully agree to accept the responsibilities it places on me, and I sign it of my own free will. I understand that this application is valid only on the day I sign it, and it may stay active for up to one month (30 days).

	Ap		Date of Application				Witness			
	Name (Last)							Social Security Number		
	Address	•	(City)	(State))	(Zip)·		Telephone (Area Code/Numbe	er)
4	Specific Job(s) Applying For: (1) (2) Are you employed now?				Are you at least 18 years of age? ☐ Yes ☐ No					
Ī	Are you employed now?			Date Available To Begin Working:						
•	If yes, may we contact your present employer?									
	Can you lawfully work				Have you been convicted of a felony in the last 7 years? Yes No If yes, explain:					
	in the U.S.?									
	Have you worked for Gulf Coast Shipyard Group, Inc.? ☐ Yes ☐ No)	Are you capa	able of work	ing at he	ights? 🛭 Y	∕es □ No	
	If Yes, When:				I cannot			ime 🖸 Day Shift		
	Where:				regularly wo	rk: C	3 Weeke	nds	□ Night Shift	
	Name ar	nd Address of School	Dates Atte	ended	Subject Are	ea Studied	Did yo	u Graduate?	Degree and	Major
	High School						□ Yes			
Z							□ No		<u> </u>	
DUCATION	College/University	From				- 103	Date			
		То				□ No				
င်	Graduate/Profession	From				- ,00	Date .			
Ž		То				□ No				
	Business/Technica	From	From			□ Yes □	ate			
			То				□ No			
	Certifications/Licenses (Specify Type, Date Earned and Number)									
	I have one (1) year	or more work experience	with the following: (chec	ck all that a	ppły)					
	WELDING MACHINERY MATERIAL HANDLING		PAINT/C	OATING	OFFICE/CL	ERICAL	OT	HER		
	☐ ASME Code	☐ Shears	☐ Forklift	☐ Airless			tchboard/PBX		☐ Blueprints/Schematics	
	☐ AWS Code	☐ Lathes	□ Crane	□ Ename			☐ Dictation Equipment		☐ Robotic Equipment	
7	☐ Semi-auto ☐ Stick	☐ Presses ☐ Threaders	☐ Mobile Equipment☐ Hysters	•	☐ Epoxies ☐ Electrostatic		☐ CRT/Data Entry ☐ Calculator		□ CPR □ First Aid	
ᆛ	☐ Submerged Arc	☐ Flangers	□	☐ Urethanes		☐ Word Processing			☐ Security	
=	☐ Tacking	☐ Grinders	MAINTENANCE	□ Polyurethanes		☐ Spreadsheets			☐ Truck Driving	
	☐ All Position	 Burning Equipment 	☐ Electrical	☐ Esters		□ Database			<u> </u>	
	□ Aluminum	☐ Bending Rolls	□ Mechanical		Components	☐ Personal/Mini Compute			<u> </u>	
	☐ Stainless ☐ Alloys	CNC	☐ Hydraulic	Grit Bla		☐ Midrange/Mainframe			<u> </u>	
	LAHOVS	<u> </u>	□ Electronic	□ Shot B	เสริเ	☐ Computer Peripherals ☐ CAD Systems		aıo L.Í.	Q	
	☐ Carbon Steel			<u> </u>		•	•			

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