



# CONCORD SHORE SERVICES

3524 16<sup>th</sup> Street, Suite D, Metairie, Louisiana 70002

## APPLICATION FOR EMPLOYMENT - GENERAL

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or handicap.

Date of application\_\_\_\_\_

Position(s) Applied For\_\_\_\_\_

Name \_\_\_\_\_ Email Address\_\_\_\_\_

*Last*

*First*

*Middle*

Address\_\_\_\_\_

*Street*

*City*

\_\_\_\_\_ Home Phone\_\_\_\_\_

*State*

*Zip*

Cell Phone\_\_\_\_\_ .

Previous Address \_\_\_\_\_ How Long\_\_\_\_\_

*(Include Past Three Years)*

*Street*

*City*

*State/Zip Code*

*Street*

*City*

*State/Zip Code*

How Long\_\_\_\_\_

If hired can you present evidence of U.S. citizenship or your legal right to live and work in this country? \_\_\_\_\_

In case of emergency notify\_\_\_\_\_

*Name*

*Address*

*Phone*

Have you worked for this company or a Cruise Line before?\_\_\_\_\_ Where?\_\_\_\_\_

Dates: From\_\_\_\_\_ To\_\_\_\_\_ Rate of Pay\_\_\_\_\_ Position\_\_\_\_\_

Reason for Leaving\_\_\_\_\_

Are you employed now?\_\_\_\_\_ If not, how long since leaving last employment?\_\_\_\_\_

Who referred you?\_\_\_\_\_ Rate of pay expected\_\_\_\_\_

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## EMPLOYMENT HISTORY

**LAST EMPLOYER NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

STARTING RATE OF PAY \_\_\_\_\_ ENDING RATE OF PAY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

**LAST EMPLOYER NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

STARTING RATE OF PAY \_\_\_\_\_ ENDING RATE OF PAY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

**LAST EMPLOYER NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

STARTING RATE OF PAY \_\_\_\_\_ ENDING RATE OF PAY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

**LAST EMPLOYER NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_

STARTING RATE OF PAY \_\_\_\_\_ ENDING RATE OF PAY \_\_\_\_\_

REASONS FOR LEAVING \_\_\_\_\_

**Days Available to work: Please circle all that apply.**

**Monday      Thursday      Saturday      Sunday**

**Do you accept Text messages?**    ☐ Yes    ☐ No

### Education

Circle Highest Grade Completed    1 2 3 4 5 6 7 8    High School: 1 2 3 4    College: 1 2 3 4  
Last School Attended \_\_\_\_\_  
Name \_\_\_\_\_ City \_\_\_\_\_

### Military Status

Have you served in the U.S. Armed Forces? \_\_\_\_\_ Branch \_\_\_\_\_ Dates: From \_\_\_\_\_ To: \_\_\_\_\_  
Rank at Discharge: \_\_\_\_\_ Date of Discharge \_\_\_\_\_  
(In N.J. do not fill in this line unless hired.) Draft Status: \_\_\_\_\_ Reserve Status: \_\_\_\_\_

### Experience and Qualifications - Other

Do you own a TWIC card? \_\_\_\_\_ Exp Date: \_\_\_\_\_

Know/speak any foreign languages, please list?

\_\_\_\_\_

List courses and training other than shown elsewhere in this application, relevant to this position or customer service experience.

\_\_\_\_\_

\_\_\_\_\_

Previous Customer Service Experience:

\_\_\_\_\_

\_\_\_\_\_

To be read and signed by applicant:

By signing my name below, I certify that the answers given in this for employment are true and correct to the best of my knowledge. I authorize such inquiry into the statements made in this application as may be necessary in reaching an employment decision. I understand that any false or misleading information given in this application or during a pre-employment interview, including a failure to disclose requested information, may result in my discharge.

I understand that any employment relationship with this employer is "at will," which means that the employee may resign at any time and the employer may discharge the employee at any time, with or without cause. I also understand that this at-will employment relationship may not be changed by any written document or by any behavior, unless the change is specifically acknowledged in writing by the President of the company.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

\_\_\_\_\_