



# DEEP SEA FISHERIES

3900 RAILWAY AVENUE  
EVERETT, WA 98201  
TELEPHONE: 425-742-8609  
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www.deepseafisheries.com

## APPLICATION FOR AT WILL EMPLOYMENT

(by Deep Sea Fisheries, Inc. or Other Independent Employer or Affiliated Companies)

LAST NAME		FIRST NAME		INITIAL	DATE OF APPLICATION	
STREET ADDRESS			CITY		STATE	ZIP CODE
TELEPHONE NUMBER(S) (Include area codes)		EMAIL ADDRESS		DO YOU HAVE A SOCIAL SECURITY NUMBER? YES <input type="checkbox"/> NO <input type="checkbox"/>		DATE AVAILABLE

**EQUAL EMPLOYMENT OPPORTUNITY POLICY.** The policy of Deep Sea Fisheries, Inc. (and all other independent "Employers" or affiliated companies for whom Deep Sea Fisheries, Inc. provides employment and personnel services) is to seek and employ the best qualified personnel and to provide equal opportunity for the advancement of employees, including upgrading, promotion and training and to administer these activities in a manner that does not discriminate against any person because of race, color, religion, age, sex, marital status, national origin, physical or mental handicap or disability, or sexual orientation/gender expression or identity.

**POSITIONS APPLIED FOR:**

- \_\_\_\_\_
- \_\_\_\_\_

ARE YOU WILLING TO SUBMIT TO DRUG TESTS OF URINE, BLOOD, SALIVA, AND BREATH?  
YES  NO

ARE YOU 18 YEARS OF AGE OR OLDER?  
YES  NO

**WHO REFERRED YOU TO DEEP SEA FISHERIES?**

NAME: \_\_\_\_\_

OTHER: \_\_\_\_\_

**HAVE YOU EVER WORKED FOR DEEP SEA FISHERIES OR AN AFFILIATED COMPANY?**

WHERE? \_\_\_\_\_

WHEN? \_\_\_\_\_

POSITION? \_\_\_\_\_

**HAVE YOU EVER WORKED IN ALASKA?** Y  N

**HAVE YOU EVER WORKED ON A VESSEL?** Y  N

WHEN? \_\_\_\_\_ WHERE? \_\_\_\_\_

NAME OF VESSEL? \_\_\_\_\_

EDUCATION: NAME AND LOCATION OF SCHOOL	FIELD OF STUDY	YEARS COMPLETED	YEARS ATTENDED		DEGREE / DIPLOMA
			FROM	TO	
HIGH SCHOOL _____	_____	_____	_____	_____	_____
COLLEGE _____	_____	_____	_____	_____	_____
OTHER _____	_____	_____	_____	_____	_____

**QUALIFICATIONS:** Please list any licenses, certificates, training or specialized experience you feel relates to the position(s) applied for that would help you perform the work, such as schools, vocational or technical programs, military training, hobbies, work experiences, etc. Please indicate your seafood handling skills and experience.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CRIMINAL CONVICTIONS:**  
(Conviction of a crime is not an automatic bar to employment. Factors such as the age of the offense, the seriousness and nature of the violation and rehabilitation will be considered.)

Have you been convicted of a crime other than a traffic violation in the last 7 years? Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

**PERSONAL ABILITIES:**

Are there any days you are not available to work, Monday through Sunday? Yes  No

Are there any hours or shifts you are not available to work in a 24 hour day? Yes  No

Do you have the ability to perform the essential functions of the work normally involved in the positions(s) for which you are applying? Yes  No

If no, please explain: \_\_\_\_\_

\_\_\_\_\_

PRESENT OR LAST EMPLOYER (Company Name) May we contact?	PHONE	HIRE DATE	JOB TITLE	START PAY
ADDRESS		DATE LEFT	SUPERVISOR	FINAL PAY
JOB DUTIES		REASON FOR LEAVING		
PREVIOUS EMPLOYER (Company Name) May we contact?	PHONE	HIRE DATE	JOB TITLE	START PAY
ADDRESS		DATE LEFT	SUPERVISOR	FINAL PAY
JOB DUTIES		REASON FOR LEAVING		
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ADDRESS		DATE LEFT	SUPERVISOR	FINAL PAY
JOB DUTIES		REASON FOR LEAVING		

- I authorize the investigation of all matters which Deep Sea Fisheries, Inc. (and its affiliates) deems relevant to my qualifications for employment, including all statements made in this application and in any attachments and supporting documents. I authorize you to request and receive such information and I release from all liability any persons (such as former supervisors or employers) supplying it. I also release you from liability which might result from making the investigations.
- I certify that the facts and information in this application and in my attachments or supporting documents are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission, as well as any misleading statement or omission, may result in denial of employment or immediate termination, regardless of when or how discovered.
- I agree to conform to all existing and future Deep Sea Fisheries, Inc. (and its affiliates) policies, work rules and duties and I understand that such policies and rules may be changed, interpreted, withdrawn, or added to as the employer deems appropriate. I also understand that Deep Sea Fisheries, Inc. (and its affiliates) reserves the right to change wages, days and hours of work and working conditions as deemed necessary.

- I understand that after the conditional offer of employment (and my acceptance of the offer) I may be required to submit to medical, physical, and mental health examinations, including tests for the presence of alcohol and other drugs, tests of urine, blood, saliva and breath, before, during and after actual employment. I agree to such testing at the Employer's expense. I authorize release of the results to Deep Sea Fisheries, Inc. (and affiliates) and use of the results to evaluate whether I have the physical and mental ability, with or without reasonable accommodation, to perform the essential functions of the employment positions for which I applied, and to evaluate whether I have any other condition that is not protected by the Americans with Disabilities Act or other laws.
- I RELEASE DEEP SEA FISHERIES, INC. (AND ITS AFFILIATES) FROM ANY AND ALL LIABILITY INCIDENT TO THE TESTING OR USE OF THE RESULTS FOR THIS EVALUATION.**

**I UNDERSTAND THIS APPLICATION IS FOR AN AT WILL EMPLOYMENT CONTRACT. THIS APPLICATION DOES NOT CONSTITUTE AN EMPLOYMENT CONTRACT. I UNDERSTAND THAT IF I AM OFFERED AND ACCEPT A POSITION, I MAY RESIGN OR BE TERMINATED, WITH OR WITHOUT CAUSE OR NOTICE, AT ANY TIME.**

HIRED: YES NO  
 PAY RATE: \_\_\_\_\_  
 AIRFARE: \_\_\_\_\_  
 INTERVIEWED M T W T F

POSITION: \_\_\_\_\_  
 VESSEL: \_\_\_\_\_  
 DT \_\_\_\_\_ SC \_\_\_\_\_ DD \_\_\_\_\_  
 BY: \_\_\_\_\_

\_\_\_\_\_  
 APPLICANT'S SIGNATURE

\_\_\_\_\_  
 DATE

NO DEEP SEA FISHERIES, INC. (OR ITS AFFILIATED COMPANIES) REPRESENTATIVE HAS MADE ANY ORAL OR WRITTEN REPRESENTATION INCONSISTENT WITH THESE PROVISIONS.