

REFERENCES

Give below the names of three people not RELATED to you, whom you have known at least 1 year.

| Name | Address | Business | Phone | Years Known |
|------|---------|----------|-------|-------------|
| | | | | |
| | | | | |
| | | | | |

IN CASE OF EMERGENCY _____
 Name Address Phone

I UNDERSTAND THERE IS NO GUARANTEE OF A JOB OFFER OR JOB INTERVIEW IN COMPLETING THIS APPLICATION. YOUR APPLICATION WILL BE CONSIDERED WITH OTHERS WHO HAVE SUBMITTED APPLICATIONS AND DECISIONS ABOUT INTERVIEWS WILL BE BASED ON THIS COMPARISON. THE APPLICATION MUST BE COMPLETELY FILLED OUT IN ORDER FOR IT TO BE CONSIDERED FOR EMPLOYMENT. IF INFORMATION PROVIDED CANNOT BE SATISFACTORILY VERIFIED BY EMPLOYMENT REFERENCE CHECKS YOUR APPLICATION COULD BE CONSIDERED INCOMPLETE. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. DUE TO THE LARGE NUMBER OF APPLICATIONS WE RECEIVE AND THE COMPETITIVE NATURE OF OUR EMPLOYMENT PROCESS, SPECIFIC REASONS FOR EMPLOYMENT DECISIONS WILL NOT BE RELEASED. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I FURTHER UNDERSTAND AND AGREE THAT IF EMPLOYED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE. I ALSO UNDERSTAND THAT MY APPLICATION WILL BE KEPT ACTIVE FOR A PERIOD OF 90 DAYS AFTERWHICH TIME I MUST REAPPLY TO BE CONSIDERED FOR EMPLOYMENT.

IN COMPLETING THE APPLICATION YOU WILL BE SUBJECT TO THE FOLLOWING CHECKS:

- EMPLOYMENT REFERENCE CHECK FROM FORMER EMPLOYERS
- CRIMINAL RECORD CHECK
- PRE-EMPLOYMENT DRUG SCREEN

SIGNATURE _____ DATE _____

Please mail this application to:

**OCEAN MARINE YACHT CENTER
 ATTN: ADMINISTRATION
 ONE CRAWFORD COURT
 PORTSMOUTH, VA 23704**

Company Use Only

Position _____ Start Date: ___/___/___ Rate Of Pay _____

(Circle one for each category)

| | | | | | | |
|-----------------------|-------------------------|-----------------------------------|------------------------------------|-----------------------|-----------------|------------------|
| EEO Code | 1. <i>Manager</i> | 4. <i>Sales</i> | 7. <i>Operatives — Semiskilled</i> | | | |
| | 2. <i>Professional</i> | 5. <i>Office Clerical</i> | 8. <i>Laborers — Unskilled</i> | | | |
| | 3. <i>Tech</i> | 6. <i>Craft Workers - Skilled</i> | 9. <i>Service Worker</i> | | | |
| Department | 00 <i>Admin</i> | 01 <i>Security</i> | 02 <i>Marina</i> | 03 <i>Dry Storage</i> | | |
| | 04 <i>Repairs Small</i> | 5 <i>Repairs Large</i> | 06 <i>Parts Dept</i> | | | |
| Employee Class | 10 <i>Security</i> | 11 <i>Drivers</i> | Emp. Type Code | FT <i>Full-time</i> | Pay type | H- <i>Hourly</i> |
| | 12 <i>Retail</i> | 13 <i>Clerical</i> | | PT <i>Part-time</i> | | S- <i>Salary</i> |
| | 14 <i>Maint.</i> | 15 <i>Service/Yacht</i> | | | | |

Remarks: _____

Approval: _____ Date _____