FRED WAHL MARINE CONSTRUCTION

APPLICANT INFORMATION

Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available				Desired Salary	
Position Applied for					
Who do we contact in an emergency?		Phone			
Are you a citizen of the United States?	YES ☐	NO ☐	If no, are you authorized to work in the U.S.?	YES ☐	NO ☐
Have you ever worked for this company?	YES ☐	NO ☐	If so, when?		

EDUCATION

High School			Address			
From	To		Did you graduate?	YES ☐	NO ☐	Degree
College			Address			
From	To		Did you graduate?	YES ☐	NO ☐	Degree

REFERENCES

Please list three personal references.

Full Name		Years Known	
Address		Phone	
Full Name		Years Known	
Address		Phone	
Full Name		Years Known	
Address		Phone	

135 Shipyard Way ▪ Reedsport, OR 97467 ▪ Phone: 541.271.5720 ▪ FAX: 541.271.4349
E-mail: info@fredwahlmarine.com

PREVIOUS EMPLOYMENT

Company		Phone
Address		Supervisor
Job Title	Starting Salary $	Ending Salary $
Responsibilities		
From To	Reason for Leaving	
May we contact them? Yes No		
Company		Phone
Address		Supervisor
Job Title	Starting Salary $	Ending Salary $
Responsibilities		
From To	Reason for Leaving	
May we contact them? Yes No		
Company		Phone
Address		Supervisor
Job Title	Starting Salary $	Ending Salary $
Responsibilities		
From To	Reason for Leaving	
May we contact them? Yes No		

MILITARY SERVICE

Branch	From To
Rank at Discharge	Type of Discharge

DRUG SCREENING

I authorize Fred Wahl Marine Construction to conduct a pre-employment Drug Test	
Signature	Date

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date