Seagrove
A division of Premium Aquatics, LLC
An Alaska limited liability company

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____

Position Applied for: _____

Are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? _____

☐ ☐

_____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address:

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

References

Please list two professional references.

Full Name: _____ Position: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Position: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Disclaimer and Signature

Warranties of Applicant. Applicant represents and warrants that he/she is in sound physical and mental health and able to handle the work to be assigned to Applicant. Applicant understands that most of the work to be performed is arduous, physically demanding and may be performed under severe weather conditions and at sea. Applicant represents and warrants that there are no physical, emotional or personal problems that would prevent Applicant from fully performing the duties to be assigned if the Applicant is hired by the Company to work in the farm's operations.

Personal Items. Applicant assumes full responsibility for all personal items aboard the Company's vessels and acknowledges that Company does not provide insurance to cover their loss.

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: _____