



JONES MARINE GROUP LTD.

P.O. Box 29, Chemainus, BC V0R 1K0
Phone 250.246.1100 Fax 250.246.3388

HR – APPLICATION

Position Applied For: _____ Date: _____

Last Name: _____ First Name: _____ Middle Name: _____

Address: _____ Postal Cd _____

SIN #: _____ Date of Birth : _____

Cell/Phone # _____ email: _____

Education:

School Attended	Grade	Year Grad.

Licenses/Training/Upgrading/Certificates:

Course Title	School/Training Centre	Number	Date Issued:	Validity

Work Experience:

Date	Years of Service	Position	Name of Company	Vessel

From	To				Name	Type	GRT	Power

References:

Name(s)	Address	Occupation	Telephone No.

Yes No

___ ___ I certify that I do not use any substance that will impair my ability to ensure Fitness for Duty and for my safety and others. (Jones Marine has ZERO tolerance)

___ ___ Will you submit to a safety sensitive Drug/Alcohol Testing

___ ___ Do you have a valid Driver's License (copy)

___ ___ I hereby certify that I have no criminal record and that I am legally allowed to enter the USA with a valid Canadian Passport

___ ___ I give permission to contact any references in connection with this application.

___ ___ Have you had any WCB Claims If yes, explain: _____

Note: Employment will be denied for failure to report the truth on this application.

Citizenship: _____ Place of birth: _____

Signature of applicant: _____ Date: _____

Contact: Bob Wilson (250) 246-1100
Email: dispatch@jnstugs.com

OFFICE USE ONLY:

Notes from References:

Reference #1 :

Reference #2:

Reference #3:
