



Employment Application  
PO Box 300  
Wanchese, NC 27981  
252-473-9797  
252-473-9922 fax

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

What position are you applying for: \_\_\_\_\_

What qualifications do you have for this position? (Education, previous work experience, etc.)

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Please list any special skills that you may have: (i.e. CDL License, foreign language, etc.)

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Why would you like to work for Bayliss Boatworks? \_\_\_\_\_

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Describe your most respected co-worker, why? \_\_\_\_\_

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Give a recent example of when you felt you went over and above the call of duty.

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Are you currently employed? \_\_\_\_\_ Where? \_\_\_\_\_

Job Title: \_\_\_\_\_

Reason for leaving? \_\_\_\_\_

Starting salary: \_\_\_\_\_ Ending salary \_\_\_\_\_ Length of employment \_\_\_\_\_

May we contact employer? \_\_\_\_\_

**WORK HISTORY:**

List the past three previous positions held.

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Ending salary: \_\_\_\_\_ May we contact employer? \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Ending salary: \_\_\_\_\_ May we contact employer? \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Job Title: \_\_\_\_\_ Length of employment: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Ending salary: \_\_\_\_\_ May we contact employer? \_\_\_\_\_ Phone: \_\_\_\_\_

EDUCATION

Circle highest grade completed: 9 10 11 12 GED		College 1 2 3 4	
Schools	Name & Location	Dates attended	Graduate (yes or no)
High School			
College			
Other			

Referral Source

Were you referred by anyone who works here? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

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

I certify that I have given true, accurate and complete information on this form to the best of my knowledge and understand that, if employed; falsified statements on this application shall be grounds for dismissal. I authorize investigation concerning my previous employment and any pertinent information they may have available concerning my qualifications. I understand that if hired my employment is for no definite period of time regardless of the date of payment of wages and salary and I may be terminated at any time without prior notice and without cause.

Signature \_\_\_\_\_ Date \_\_\_\_\_