

Employment Application  
Adirondack II – Sailing Excursions, Inc.  
PO Box 1155, Newport, RI 02840  
401-862-8441 [www.sail-newport.com](http://www.sail-newport.com)

Our policy is to provide equal employment opportunity to all qualified persons.

Position Desired: Crew \_\_\_\_\_ Captain \_\_\_\_\_ Booth Staff \_\_\_\_\_

These jobs involve heavy lifting and physical labor.

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone \_\_\_\_\_ Email Address \_\_\_\_\_

Position applied for \_\_\_\_\_

How did you hear of this opening? \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.)  Yes  No

Our season runs from early May to late October. What months are you available ? \_\_\_\_\_

Are you available full time or part time? \_\_\_\_\_

Are you willing to work nights and weekends? \_\_\_\_\_

How soon can you start work? \_\_\_\_\_

When are you available for an interview? \_\_\_\_\_

Have you ever failed a drug test? \_\_\_\_\_

Have you ever previously been interviewed by this company here, in NYC or KeyWest? If so, when?  
\_\_\_\_\_ By whom? \_\_\_\_\_

Do you have a Driver's License? \_\_\_\_\_ Number \_\_\_\_\_ State \_\_\_\_\_

# Education

Education	Year	Major	Degree
High School _____	_____	_____	_____
College _____	_____	_____	_____
Training _____	_____	_____	_____
Other Training _____	_____	_____	_____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

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Please rate yourself on a scale of 1-10 (10 being the highest) in the following areas:

- computer skills  working with the public  sales  boat maintenance  sail handling  mechanical repair, i.e. engine, pumps  electrical troubleshooting/repair  lifting heavy objects  customer service  bartending  waitstaff

**Sailing Experience** Do you have a USCG License? \_\_\_\_\_

If so, what is the tonnage and route? \_\_\_\_\_

How long have you had your USCG License? \_\_\_\_\_

Where have you used it, in what capacity? \_\_\_\_\_

How old were you when you learned to sail? \_\_\_\_\_

Where and how did you learn to sail? \_\_\_\_\_

What boats have you sailed on, dates of employment or trips and position?

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Employment History (Start with most recent employer please list all employment for the past five years, attach additional pages if necessary) Or attach a resume.

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

\_\_\_\_\_

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

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

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May we contact?  Yes  No

Responsibilities \_\_\_\_\_

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Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

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

References: Please list one or two references with address and phone number, not family members:

1.

2.

## **Applicant's Certification and Agreement**

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

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

Please either email to [info@sail-newport.com](mailto:info@sail-newport.com) or mail to address on page 1 of application