



**Employment Application  
 For a Conditional  
 Job Offer  
 for  
 The Great Lakes Towing  
 Company®  
 Great Lakes Shipyard  
 Soo Linehandling Services, Inc.**

**4500 Division Avenue • Cleveland, OH 44102 (216) 621-4854**

**INSTRUCTIONS:** This application for a Conditional Job Offer, must be completed in its entirety, and submitted with resume and required documentation (as indicated) to be considered for employment. Incomplete applications will not be considered.

The Company may ask disability-related questions; require medical examinations and require submission of further documentation and information from an applicant after the applicant has been given a Conditional Job Offer. Applications are considered active for six months, at which point applicants not hired must reapply. Please complete the application fully. If information is not applicable, then write "N/A". DO NOT leave any blanks. DO NOT write in the shaded areas.

**“Equal Opportunity/Affirmative Action Employer”**

We ensure that all individuals have an equal opportunity for employment, without regard to race, color, religion, sex, national origin, age, pregnancy, disability or status as a veteran, marital status, military status, genetic information, sexual orientation, gender expression or identity, or any other status or condition protected by applicable federal, state or local laws, except where a bona fide occupational qualification applies. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Our company Affirmative Action Program refers to our aggressive recruitment programs, mentoring, training, and family programs that work to recruit and retain qualified individuals. Equal access to employment services and programs are available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify the Company personnel representative at the address shown above.

<b>1. Date of Application</b>		<b>2. Name (First, Middle, Last)</b>	
<b>3. Home Telephone No.</b>	<b>4. Mobile or Other Telephone No.</b>	<b>5. E-Mail Address</b>	
(    )	(    )		
<b>6. Present Mailing Address (Number, Street, City and Zip Code)</b>			<b>7. Are You 18 Years or Older</b>
			Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>8. What position are you applying for:</b>		<b>9. Date Available to Start Work</b>	
<b>10. EDUCATION AND TRAINING</b>			
<b>10 (a) High School</b>			
<i>Name of High School</i>		<i>Address (City, State)</i>	
<b>10 (b) Did you receive a diploma or GED equivalency? Yes <input type="checkbox"/> No <input type="checkbox"/></b>		<b>Years Completed (Check) 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/></b>	
<b>10 (c) Have you ever attended college or graduate school? YES <input type="checkbox"/> if yes continue to block 10 (d) No <input type="checkbox"/> If NO, go to block 10 (e)</b>			
<b>10 (d) College/University</b>			
<i>Name of College/University School</i>		<i>Address (City, State)</i>	
<i>Dates Attended (Month, Year)</i>	<i>Number of Credit Hours Completed</i>	<i>Type of Degree and Major (e.g. BA, MA)</i>	<i>Month and Year of Degree</i>

10. EDUCATION AND TRAINING (CONTINUED)			
10 (e) List any other courses or training related to the job you are applying form (business, vocational, trade, Armed Forces).			
Name of School		Address (City, State)	
Month and Year Attended	Class Room Hours	Subject(s)	Training Completed
			Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>11. EMPLOYMENT HISTORY</b>			
Please start with your most recent job. Attach additional sheets as necessary. Include military service assignments and volunteer activities. Please complete all portions of this section. Also indicate whether or not we may contact your present or last employer. A "NO" will not affect the initial evaluation of your qualifications. If it is necessary to contact your present or last employers prior to final selection, you will be notified first. NOTE: If you are applying for a DOT-Regulated position, the Company is required to obtain Drug & Alcohol Testing information prior to employing someone in a safety-sensitive function in accordance with 49CFR40.25			
11(a) Name of Present or Last Employer		Present or Last Job Title	
Address (Include street, city, state and zip code)		Telephone Number	
Dates of Employment	Salary History (Present or Last salary held. Must be indicated in order for consideration)	May We Contact This Employer	
	\$	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Duties Performed and Reason for Leaving			
11(b) Name of Prior Employer		Prior Job Title	
Address (Include street, city, state and zip code)		Telephone Number	
Dates of Employment	Salary History (Last salary held. Must be indicated in order for consideration)	May We Contact This Employer	
	\$	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Duties Performed and Reason for Leaving			
11(c) Name of prior Employer		Prior Job Title	
Address (Include street, city, state and zip code)		Telephone Number	
Dates of Employment	Salary History (Last salary held. Must be indicated in order for consideration)	May We Contact This Employer	
	\$	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Duties Performed and Reason for Leaving			

**12. PROFESSIONAL REFERENCES***(List three [3] persons who are not related to you, and who are familiar with you)*

Name	Nature of Association	Telephone Number	May We Contact
a)			Yes <input type="checkbox"/> No <input type="checkbox"/>
b)			Yes <input type="checkbox"/> No <input type="checkbox"/>
c)			Yes <input type="checkbox"/> No <input type="checkbox"/>

**13. PROFESSIONAL, EDUCATIONAL OR CIVIC ORGANIZATIONS***(List memberships as indicated. You may exclude those which may disclose your race, color, religion, national origin or any protected class.)*

Name of Organization	Location	Dates of Membership
a)		
b)		

**14. ACTIVE MILITARY SERVICE**

14(a) Have you served in the United States Military Service? (If your only active duty was training in the Reserves or National Guard, answer "NO".) Yes  No

If "YES" See attached Special Notice to Covered Veterans (Optional)

14(b) Did you retire? Yes  No

14(c) Were you discharged from the military service under honorable conditions? (If your discharge was changed to "honorable" or "general" by a Discharge Review Board, answer "YES." If you receive a clemency discharge, answer "NO.") Yes  No

14(d) If "NO," provide the date and type of discharge you received below:

Month	Day	Year	Type of Discharge

14(e) If last employment was military service, attach copies of DOD Form DD-214 and, at the applicants option, attach your last three (3) performance evaluations prior to discharge.

**15. REFERRAL INFORMATION**

15(a) How did you hear about the Company? (Check all that apply)

Newspaper ad  Friend  Employee  Union  Website  Other (Specify) \_\_\_\_\_

15(b) Were you referred by someone?	15(c) If yes, by whom?	15(d) May we contact them for reference?
Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

15(e) Have you ever applied to, or worked for a Company in the Great Lakes Group of Companies before? Yes  No

**16. ADDITIONAL QUESTIONS**

*NOTE: It is important that you give complete and truthful answers to questions below. If you answer "YES" to any of them, provide your explanation(s) in block 16(g). Include convictions resulting from a plea of nolo contendere (no contest). Omit: (1) traffic fines of \$100.00 or less; (2) any violation of law committed before your 16th birthday; (3) any violation of law committed before your 18th birthday, if finally decided in juvenile court or under a Youth Offender law; (4) any violation of law aside under the Federal Youth Corrections Act or similar state law; (5) any conviction whose record was expunged under Federal or state law. We will consider the date, facts, and circumstances of each event you list. In most cases you can still be considered for employment. However, if you fail to tell the truth or fail to list all relevant events or circumstances, this may be grounds for not hiring you, or for terminating your employment after you begin work.*

16(a) During the last five (5) years, were you fired from any job for any reason, did you quit after being told you would be fired, or did you leave by mutual agreement because of specific problems? If "Yes," please explain below. Yes  No

16(b) Have you ever been convicted of, or forfeited collateral for any felony violation? (Generally, a felony is defined as any violation of law punishable by imprisonment of longer than one (1) year, except for violations called misdemeanors under State law which are punishable by imprisonment of two (2) years or less). Yes  No

**16. ADDITIONAL QUESTIONS (CONTINUED)**

16(c) Have you ever been convicted, or forfeited collateral for any firearms or explosives violation? Yes  No

16(d) Are you now under charges for any violation of law? Yes  No

16(e) During the last five (5) years have you forfeited collateral, been convicted, been imprisoned, been on probation, or been on parole? Do not include violations reported in 16(b), 16(c), or 16(d), above. Yes  No

16(f) Have you ever been convicted by a military court martial? If no military service, answer "NO." Yes  No

16(g) If you checked "YES" for any of the questions above, please provide an explanation below.

Item No.	Month & Year	Explanation

  

Item No.	Month & Year	Explanation

**17. REPRESENTATIONS**

17(a) Attendance: *The Company is a service provider and employee attendance is critical to meet customer service demands.*

(i) Are you able to meet the Company's attendance requirements? Yes  No

(ii) How many days, other than vacation days, were you absent from your last job? Less than 5  6-10  More than 10

(iii) How many Mondays or Fridays were you absent last year on leave other than approved vacation leave?  
Number of Mondays \_\_\_\_\_ Number of Fridays \_\_\_\_\_

(iv) Do you have any objection to working overtime if necessary? Yes  No

17(b) Illegal Drug Use / Medical History:

(i) Have you ever used illegal drugs? Yes  No

(ii) Have you used illegal drugs within the last six (6) months? Yes  No   
If yes, when was the last time you used illegal drugs? \_\_\_\_\_

(iii) Have you ever been convicted for driving under the influence of illegal drugs or alcohol? Yes  No

17(c) General Employment Information

(i) Can you travel if required by this position? Yes  No

(ii) Can you submit proof of legal employment authorization and identity as required by governmental authorities? Yes  No

(iii) Can you perform any or all job functions for the position applied for, with or without reasonable accommodation? Yes  No

**18. CERTIFICATIONS**

18(a) I understand that the Company's Policy on Alcohol, Drugs and Controlled Substances requires Chemical Testing for employees as listed below. I am willing to participate in the required Pre-Employment Chemical Test and, if hired, to comply with the aforementioned Company policy.

(a) \_\_\_\_\_  
Initial

**I. Vessel Employees Afloat: Pre-Employment, Periodic, Random, Reasonable Cause, Post-Accident Testing.**

- a. Any person, tug or crew member engaged or employed on board a Company tug, barge, vessel, or equipment acting under the authority of a license, certificate of registry, or merchant mariner's document, whether or not a member of the Company tug's crew;
- b. Any person employed shore side as an employee or supervisor, who, by virtue of his or her shore side position, may be engaged or employed on board a Company tug acting under authority of a license, certificate of registry, or merchant mariner's document, whether or not the employee is a member of the Company tug's crew.

**II. Vessel Employees Ashore, Shipyard Employees and Linehandlers: Pre-Employment, Periodic, Random, Reasonable Cause, Post-Accident Testing.**

- a. Any person engaged in duties which directly affect the safety of a Company tug's navigation or operations, or whose duties involve potentially dangerous and hazardous work that may endanger the safety of either themselves or other employees.
- b. All Company shipyard, or other Company maintenance facility employees (excluding administrative and clerical personnel);
- c. All other employees who perform repair and maintenance, construction, and reconstruction duties on board vessels and the dry dock;
- d. All Soo Linehandling Services, Inc. employees (excluding administrative and clerical personnel); and Employees, in various ports.

**III. Administrative (including Management and Clerical) Personnel: Reasonable Cause Testing.**

- a. All shore side employees performing administrative, management, and clerical duties who are not engaged or employed on board a Company tug, barge, or vessel.
- b. Any person engaged in duties which DO NOT directly affect the safety of a Company tug's navigation or operations, or whose duties DO NOT involve potentially dangerous work that may endanger the safety of either themselves or other employees.

18(b) I certify that the information provided in this employment application for a Conditional Job Offer (and accompanying resume, or documentation, if any) is true and complete, and I understand that any false or misleading information, misrepresentation or material omission may disqualify me from further consideration for employment or immediate termination of employment, if I am employed, whenever it may be discovered. I agree to immediately notify the Company if I should be convicted of a felony, of any crime involving dishonesty, breach of trust, controlled substances, sexual misconduct, abuse, or violence, while my job application is pending, or during my period of employment if hired.

(b) \_\_\_\_\_  
Initial

**18. Certifications (*CONTINUED*)**

18(c) I understand that I am authorizing the release of pre-employment information gained through my employment references. This is to allow the Company to verify and, in the Company's discretion, to perform other background investigations to determine my qualification for employment. Further, I understand that the Company, through a separate Company may investigate my academic credentials, prior employment, personal/professional references, credit record, motor vehicle record, and/or criminal record. I understand that a report may include information obtained through personal interview regarding my character, general reputation, personal characteristics, and/or mode of living. I understand that I may make a written request to obtain a description of the nature and scope of any report, which is prepared regarding me.

(c) \_\_\_\_\_  
*Initial*

18(d) I understand that this Application is for a Conditional Job Offer and does not constitute an offer or create a contract of employment. I understand that if an offer of employment is made, and if hired, I am obliged to comply with the Company' current and subsequently adopted policies, including the Company's Employment Handbook, the Company's Policy on Alcohol, Drugs and Controlled Substances, and the Company's Responsible Carrier Program Manual. I am also aware that the aforementioned Company Policies on Alcohol, Drugs, and Controlled Substances, among other things, prohibits the use and possession of intoxicants (dangerous drugs and alcohol) on Company property and vessels, and that violation of the Policies will result in disciplinary action, including suspension, and may result in termination of employment. I understand and agree that, if hired, my employment is for no definite period of time, and may, regardless of the date of payment of my wages or salary, be terminated at any time, for any reason, with or without notice. Accordingly, either the Company or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law. I understand that no person is authorized to change any of the items mentioned in this employment application for a Conditional Job Offer.

(d) \_\_\_\_\_  
*Initial*

18(e) I understand that if employed in a temporary position, I will not be entitled to health and other benefits afforded employees in permanent positions.

(e) \_\_\_\_\_  
*Initial*

18(f) I understand that it is the Company's policy not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the Americans with Disabilities Act.

(f) \_\_\_\_\_  
*Initial*

18(g) I understand that once I am offered a conditional job offer and I accept, I will be required to provide satisfactory proof of identity and legal work authorization before my initial start date. If I fail to submit such proof and/or the Company is not able to confirm legal work authorization through the E-Verify process, my conditional job offer with the company will be provoked.

(g) \_\_\_\_\_  
*Initial*

18(h) I understand that once I am offered a conditional job offer and I accept, a criminal background check will be performed. If I have not been totally honest with the Company regarding my background, my conditional job offer with the company will be provoked.

(h) \_\_\_\_\_  
*Initial*

I represent and warrant that I have read and fully understand the foregoing and that I seek employment under these conditions.

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Date*

**SPECIAL NOTICE TO “COVERED VETERANS” (OPTIONAL)**

**Disabled, Other Protected, Armed Forces Special Medal, and Recently Separated Veterans**

Government contractors are subject to 38 U.S.C. 4212 of the Covered Veterans – “Veterans’ Employment Emphasis under Federal Contracts”. Revised law went into effect as of January 7, 2011. This revised law requires that government contractors take affirmative action to employ and advance qualified Covered Veterans in employment. The term “Covered Veteran” means any of the following veterans:

1. **Disabled Veteran:** Any veteran that served on active duty in the U.S. military ground, naval, or air services and is entitled to disability compensation (or who but for the receipt of military retired pay would be entitled to disability compensation) under laws administered by the Secretary of Veterans Affairs, or was discharged or released from active duty because of a service-connected disability.
2. **Other Protected Veteran:** Any veteran who served on active duty in the U.S. military ground, naval, or air service during a war or in a campaign or expedition for which a campaign badge was authorized.
3. **Armed Forces Special Medal Veteran:** Any veteran who, while serving on active duty in the U.S. military ground, naval, or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 Fed. Reg. 1209).
4. **Recently Separated Veteran:** Any veteran who served on active duty in the U.S. military, ground, naval or air service during the three-year period beginning on the date of such veteran’s discharge or release from active duty.

USERRA (The Uniformed Services Employment and Reemployment Rights Act) requires employers to go further than the ADA by making reasonable efforts to assist a veteran who is returning to employment in becoming qualified for a job. The employer must help the veteran become qualified to perform the duties of the position whether or not the veteran has a service-connected disability requiring reasonable accommodation. This could include providing training or retraining for the position. Additionally, reasonable accommodations may be available under USERRA for individuals whose service-connected disabilities may not necessarily meet the ADA’s definition of “disability.” USERRA also applies to all employers, regardless of size. Information on the reemployment rights of uniformed service personnel can be found on DOL’s website at [www.dol.gov/vets](http://www.dol.gov/vets).

If you are a disabled veteran, or have a physical or mental handicap you may volunteer this information which will be treated as confidential. Additionally, not providing this information will not jeopardize or adversely affect your consideration for employment.

If you wish to be identified, please check the appropriate box(es) and sign below. Submission is voluntary

Disabled Veterans    Other Protected Veterans    Armed Forces Special Medal Veterans    Recently Separated Veterans

**THE AMERICANS WITH DISABILITIES ACT (ADA) AMENDMENTS ACT OF 2008**

Title I of the **Americans with Disabilities Act (ADA)** prohibits private and state and local government employers with 15 or more employees from discriminating against individuals on the basis of disability. Title I of the ADA also generally requires covered employers to make reasonable accommodations – changes in the workplace or in the way things are usually done that provide individuals with disabilities equal employment opportunities. The ADA makes it unlawful to discriminate in employment against a qualified individual with a disability, therefore, providing this information will not jeopardize or adversely affect your consideration for employment. Additionally, not providing this information will not jeopardize or adversely affect your consideration for employment. If you wish to be identified as an individual with a disability, please check:  **Yes, I am an individual with a disability.**

**Signature**

**Date of Signature (Month, Day & Year)**

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