



REFERENCES

List name and telephone number of three (3) references who are not related to you.

Name	Telephone Number	Relationship to You	# of Yrs. Known

**APPLICANT STATEMENT**

**Please read the following carefully and then sign below**

I hereby declare that the information provided by me in this Application for Employment is true, correct and complete to the best of my knowledge and that I have a genuine interest in being hired. I authorize DCL Mooring & Rigging to thoroughly investigate my past and present employment, education and activities. I release from all liability any persons, companies and corporations supplying such information. I release DCL from any and all liability resulting from the verification of such information. I understand that any false statement or omission of fact on this application and supporting documents may be grounds for rejection of this application or for dismissal from employment, regardless of when DCL may discover the omission or misrepresentation.

I understand that my status is that of an employee-at-will, meaning that I have no contractual right, express or implied, to remain in DCL's employ. In addition, I understand that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or DCL Mooring and Rigging. I understand that no representative of DCL, Inc. has any authority to enter into any oral agreement for employment for any specified period of time or make any agreement contrary to the foregoing.

I understand that if I am hired by DCL, I will be required to provide evidence of my identity and authorization for employment in the United States, prior to the commencement of my employment.

I understand that I will be required to undergo a pre-employment drug screen and pre-employment physical examination in accordance with this employer's policies. I understand that this employer will conduct a drivers' license check and a criminal background check on me in connection with this application. I waive any legal requirement that the employer provide any notice to me regarding investigative reports or records given or received in connection with this application.

I have read, fully understand and accept all terms of the foregoing applicant statement.

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_