## Leviathan Offshore, LLC 300 Bridge Road Houma, LA 70363 985-746-5898

leviathanadmin@leviathanllc.net

Personal Information										
First Name	Middle Name	Last Nam	ne	Preferred Name						
Present Street Address	City	State		Zip Code	Years at Address					
Mailing Address if different than pr	esent City	State		Zip Code	Years at Address					
Home Phone Number	Cell Phone Number	Social Seco	urity Number							
Position Desired	Pay Expected		,	hen are you available for work?						
Emergency Contact Name	Emergency Contac	t Number Relations	ship:	ther Emergency #:						
Email Address:										
Have you ever applied for employment with us?   Yes   No If yes: Month and Year										
Are you available for full-time work?   Yes   No										
Are you a U.S. Citizen? ☐ Yes ☐ No										
Are you legally eligible for employment in the United States? $\square$ Yes $\square$ No										
Do you have any relatives or friends that work for us?   Yes   No If yes, who										
Did you serve in the U.S. Armed Forces?   Yes   No If yes, what branch?										
Are you over the age of 18? ☐Yes ☐No										
Have you been convicted of a crime, excluding misdemeanors and summary offenses? ☐Yes ☐No										
If "Yes", describe in full –										
Training										
School	Name and Location	Course Study	No. of Years Completed	Did you Graduate	? Graduation Date					
High School				☐ Yes ☐ No						
College or Trade School				☐ Yes ☐ No						
Dive School				☐ Yes ☐ No						
References										
Name of Reference		Posit	Position		Contact Number					

Leviathan Offshore, LLC is an equal opportunity employer.

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Current and Previous Employment History										
Current or Last Company Name		Telephone Number		Name of Si	upervisor	Pay				
Street Address		City		State		Zip Code				
Employment – (Month and Year) From To		Reason for Leaving		<u> </u>						
Job Title		Job Duties								
Previous Company Name		Telephone Number		Name of Si	upervisor	Pay				
Street Address	City State				Zip Code					
Employment – (Month and Year) From To		Reason for Leaving								
Job Title	Job Duties									
Previous Company Name		Telephone Number		Name of Su	upervisor	Pay				
Street Address		City		State		Zip Code				
Employment – (Month and Year) From To		Reason for Leaving								
Job Title		Job Duties	l							
Previous Company Name		Telephone Number		Name of Su	upervisor	Pay				
Street Address		City		State		Zip Code				
Employment – (Month and Year) From To	Reason for Leaving									
Job Title		Job Duties	l							
Please indicate below which employers you do not wish us to contact.										
Employer		Reason								
I hereby declare that the information provided by me is true, factual, and complete. I understand that false statements will disqualify me for employment or cause my subsequent dismissal. I authorize Leviathan Offshore, LLC to investigate my past employment, training, and all other statements contained in this application. I understand that acceptance of an offer of employment creates no obligation upon you, the employer, to continue to employ me in the future.										
Print Name	Signature			Date						
FOR OFFICE USE ONLY										
Shop/Office Pay			Supervisor Pay							
Dive Pay			Hourly Pay							
HR Code										