



**ART
Catering,
Inc.**

ATTENTION APPLICANTS

PLEASE READ THE FOLLOWING:

- 1. Please read and fill out all sections completely. If any sections are not answered, this will be considered as an INCOMPLETE application.**
- 2. Must have a minimum of 5 years work experience. If you need more room please list your work experience on the back of the application.**
- 3. All applications will be held for 90 days.**
- 4. PLEASE DO NOT CALL ABOUT YOUR APPLICATION. ALL QUALIFIED APPLICANTS WILL BE CONTACTED WHEN CONSIDERED FOR INTERVIEWS.**

I have read the above and understand.

Signature

Date



NOTICE TO ALL APPLICANTS

Before applying with our company, please review the following job requirements.

YOU MUST BE ABLE TO:

1. Work offshore for 28-14 rotation.
2. Apply for TWIC's Card at employee's expense.
3. Provide your own transportation to and from the crew change locations.
4. Work in remote locations with very limited access to telephones.
5. Be flexible in order to work any available position.
6. Perform the essential functions of your job with or without reasonable accommodations. These functions include, but are not limited to, lifting and carrying 50 pounds, climbing stairs frequently, and standing for 12 hours at a time.
7. Live and work in confined spaces with others.
8. Follow company regulations regarding personal hygiene, including policies on the length of hair (men's hair cannot be over the shirt collar), no beards or mustaches past the corners of your mouth.
9. Travel by helicopter or crew boat to the work sites.
10. Wear approved steel toed, skid & oil resistant shoes while at work.
11. Work holidays, if scheduled.
12. Understand no jewelry while working.
13. Must able to read and write and understand ART's Safety Policies and Procedures for your own safety.
14. Apply for a Passport.
15. Pass a post-offer/pre-employment physical and drug screen.
16. Pass ART Catering's orientation.
17. Pass Water Survival Course (HUET/MET5) and our customers' training courses.
18. Work in a smoke free environment for a long period of time.

SIGNATURE

DATE



ART
Catering,
Inc.

Please take into consideration that this position is an offshore position. You will be required to work in remote locations with very limited access to telephones for several weeks at a time. You must provide your own transportation to the crew change locations, which range from 45 minutes to 3 hours (or more) from the Greater New Orleans area. Crew changes are usually in the early morning hours (5am-6am).

Please answer the following questions. Circle Yes or No.

- 1. Have you ever flown in a helicopter?-----YES NO
- 2. Do you get sick, or have any problems flying?-----YES NO
- 3. Are you afraid of heights?-----YES NO
- 4. Have you ever worked offshore?-----YES NO
If yes for whom_____
- 5. Do you get motion sickness or have any problems riding on a crew boat for an extended periods of time? -----YES NO
- 6. Can you swim?-----YES NO
- 7. Are you afraid of deep water?-----YES NO
- 8. Do you have any problems concerning traveling long distances to work?-----YES NO
- 9. Are you familiar with areas such as the following:
Venice-----YES NO
Fourchon-----YES NO
Morgan City-----YES NO
Cameron-----YES NO
Mobile Bay, AL-----YES NO
Picayune, MS-----YES NO
- 10. Do you know what a utility hand or galley hand does?-----YES NO
If yes please explain_____
- 11. Do you have any problems with making beds, mopping floors, cleaning bathrooms, doing laundry, washing dishes, etc?-----YES NO
- 12. Can you pass a Drug Screen?-----YES NO
- 13. Can you pass a Breathalyzer test (alcohol test) or drug screen when called upon by our customer at the heliport or boat dock-----YES NO
- 14. Do you have any physical limitations that cannot be reasonably accommodated and that would prevent you from doing heavy lifting, climbing stairs, or standing for long periods of time? -----YES NO
If yes please explain_____
- 15. Do you have any problems or reservations about working 3 to 4 weeks offshore and 1 to 2 weeks off?-----YES NO
If yes please explain_____
- 16. Would you be able to work in a smoke free environment for a long period of time?-----YES NO
- 18. Would you be able and available for a 4 to 5 day training program with some traveling involve? -----YES NO
- 19. Do you hold any safety training certifications?-----YES NO
If yes, please list_____

SIGNATURE

DATE

Name of Previous Employer

Date Employed From: ___/___/___ to ___/___/___

(Company Name)

May we contact? _____ Phone# (____) _____ - _____

Duties or Job Title: _____

(Street Address)

Ending Pay Rate: _____ Supervisor: _____

(City) (State) (Zip Code)

(Name)

Reason for Leaving: _____

Name of Previous Employer

Date Employed From: ___/___/___ to ___/___/___

(Company Name)

May we contact? _____ Phone# (____) _____ - _____

Duties or Job Title: _____

(Street Address)

Ending Pay Rate: _____ Supervisor: _____

(City) (State) (Zip Code)

(Name)

Reason for Leaving: _____

Name of Previous Employer

Date Employed From: ___/___/___ to ___/___/___

(Company Name)

May we contact? _____ Phone# (____) _____ - _____

Duties or Job Title: _____

(Street Address)

Ending Pay Rate: _____ Supervisor: _____

(City) (State) (Zip Code)

(Name)

Reason for Leaving: _____

If there are any gaps in work history please explain here: _____

Have you been convicted of a felony within the last seven years? _____ (Commission of a crime is not an automatic rejection of employment consideration. All circumstances will be considered.) If "YES", please explain:

EDUCATION

High School	City/State	Years	Graduate?	Subject or Degree Major
College or University		(1,2,3, or 4?)	(Y/N)	
Other (Trade or Business)				

United States Military Service (Branch)	Current Military Affiliation	Type of Training & Duty in Service

Please provide us with a description of any special skills or procedures you have.

Have you ever been employed with ART Catering? _____ If so, what are the dates ____/____/____ to ____/____/____
 Reason for leaving _____

Full Name of Family Member or Friend currently working at ART Catering, Inc.

	Relation	Relation
	Relation	Relation
	Relation	Relation

Full Name of Family Member(s) or Friend(s) that have worked at ART Catering, Inc.

	Relation	Relation
	Relation	Relation
	Relation	Relation

REFERENCES

Below, give the names of three persons you are not related to, whom you have known at least one year.

Name	Address	Business	Phone #	Years
Name	Address	Business	Phone #	Years
Name	Address	Business	Phone #	Years

Qualified applicants will receive consideration for employment without discrimination based on sex, marital status, race, color, creed, national origin, age, veteran status, or disability that can reasonably be accommodated without undue hardship. This application will be considered current for 90 days from the date it was completed and signed. To be considered after that time you must reapply. All questions should be fully answered for this application to be considered most effectively.

I certify that all answers given are true and correct to the best of my knowledge. I further understand and consent that statements herein may be investigated and verified in the course of considering this application. Should I become employed, I understand that false or misleading information contained therein may be the basis for immediate discharge.

I also understand that all applicants offered employment will be subject to physical examinations and drug screens and that employment, or continued employment may be contingent on these examinations and drug tests and I fully consent to such procedures. By signing this application I am indicating that I fully understand and agree to be bound by such requirements.

Signature

_____/_____/_____
Date

PLEASE NOTE: It is NOT necessary to call to check on your application. Constant phone calls only slows the review process. Job applicants will be contacted by phone only when or if a need arises. Thank you for your cooperation and patience.

> This company is an Equal Opportunity Employer. We do not discriminate in hiring or employment because of color, race, color, religion, creed, national origin, sex, age, disability, genetic information, sickle cell trait, pregnancy, childbirth, and related medical conditions, or veteran status.
> Various government agencies request statistical information regarding our hiring practice. Your cooperation in completing this form is completely voluntary, but appreciated. Any information gathered is strictly confidential
ART Catering, Inc. thanks you for your cooperation



**ART
Catering,
Inc.**

NOTICE TO APPLICANTS/EMPLOYEES OF ART CATERING, INC. REGARDING CONSUMER REPORTS

A consumer report and/or an investigative consumer report including information concerning your social security verification, employment history, county criminal background check, education, qualifications, motor vehicle record may be obtained in connection with you application for and continued employment with the company.

A consumer report containing injury and illness records and medical information may be obtained after a tentative offer of employment has been made. Upon timely written request of the Personnel Department of the Company, and within 5 days of the request, the name, address and phone number of the reporting agency and the nature and scope of the consumer report will be disclosed to you.

Before any adverse action is taken, based in whole, or in part on the information contained in the consumer report, you will be provided a copy of the report, the name, address, and telephone number of the reporting agency, a summary of your rights under the fair credit reporting act, as well as additional information on your rights under law.

**I HAVE READ THE ABOVE NOTICE TO APPLICANTS/ EMPLOYEES OF
ART CATERING, INC. REGARDING CONSUMER REPORTS AND HEREBY
AUTHORIZE THE COMPANY TO OBTAIN CONSUMER REPORTS AND/OR
INVESTIGATIVE CONSUMER REPORTS AS DESCRIBED.**

Print your name

Signature

Date