

**Application for Employment**  
Delta Marine Industries



First Name		Middle Initial		Last Name	
Address			City	State	Zip
Phone Number			Email Address		
Position Applying For			Date Available to Begin Work		
Are you eligible to work in the United States?			Have you ever been employed with Delta before?		

Education	Name of School/Program	Course of Study	Years Completed	Diploma/Degree/Cert
High School				
College				
Other				

**Describe any apprenticeships, on the job training, classes, job related skills, specialized knowledge, etc. that may be helpful in considering your application:**

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Employment Experience				
Employer			Work Performed	
City	State			
Job Title				
Dates Employed		Supervisor's Name		Reason for Leaving
From	To			

Continue Employment Experience on Back Side

Employment Experience Continued			
Employer		Work Performed	
City	State		
Job Title			
Dates Employed		Supervisor's Name	Reason for Leaving
From	To		
Employer		Work Performed	
City	State		
Job Title			
Dates Employed		Supervisor's Name	Reason for Leaving
From	To		
Employer		Work Performed	
City	State		
Job Title			
Dates Employed		Supervisor's Name	Reason for Leaving
From	To		

Delta Marine Industries is an equal opportunity employer. Delta Marine does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, gender identity or expression, pregnancy, marital status, physical or mental disability, veteran or military status or unfavorable discharge from military service, genetic information or any other status protected under applicable local, state or federal law.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Delta Marine to hire me. If I am hired, I understand that employment is of an "at will" nature, where either Delta Marine or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Delta Marine has the authority to make any assurance to the contrary.

I attest with my signature below that I have given Delta Marine true and complete information on this application. No requested information has been concealed. I authorize Delta Marine to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

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