

BOARD OF NEW ORLEANS - BATON ROUGE



STEAMSHIP PILOT EXAMINERS FOR THE MISSISSIPPI RIVER

2805 Harvard Avenue, Suite 101
Metairie, Louisiana 70006
OFFICE: (504) 887-5797
FAX (504) 887-5799
www.nobraexaminers.louisiana.gov

APPLICATION

Please type or print clearly. All applications must be fully completed and delivered in person to a member of the Board of Examiners for New Orleans and Baton Steamship Pilots for the Mississippi River (hereafter "Board of Examiners") or their authorized representative. All persons wishing to submit an application shall make an appointment by calling the Board of Examiners' office.

- I understand that I am solely responsible for submitting all required documentation requested in this application to the Board of Examiners. Initial _____
- I understand that I have an affirmative obligation to notify the Board of Examiners, in writing, of *any* change in this application. Initial _____
- I understand that this application is valid until the next apprentice selection. Initial _____

Personal Information

Last Name First Name Middle

Social Security Number Date of Birth mm/dd/yyyy

Street Address or P.O. Box

City/State/Zip (+4 optional)

Primary Phone Number

Email Address

Applicant Information

Last Name First Name Middle

Current Employment Information

Business/Firm Name
Address
City State Zip (+4 optional)
Current Position Years Employed

Are you currently enrolled in a D.O.T. approved random drug testing program?

Yes No If yes, submit documentation from employer.

Employment History

Please list all previous employers.

1) Business/Firm Name
Address
City/State/Zip (+4 optional)
Position Held Years Employed

2) Business/Firm Name
Address
City/State/Zip (+4 optional)
Position Held Years Employed

3) Business/Firm Name
Address
City/State/Zip (+4 optional)
Position Held Years Employed

4) Business/Firm Name
Address
City/State/Zip (+4 optional)
Position Held Years Employed

Applicant Information

Last Name First Name Middle

Background Information

1) Have you ever had any action taken against your driver's license, including but not limited to, suspension or revocation? If yes, please explain.

2) Have you ever had any action taken against your United States Coast Guard Merchant Mariner Credential, including but not limited to suspension or revocations? If yes, please explain.

3) Have you been a registered voter of the State of Louisiana for the past 2 years? Yes No

4) Have you ever been convicted of any crime other than minor traffic violations? Yes No

If yes, continue:

Date of Conviction

What Crime?

What Sentence?

What Jurisdiction?

Date of Conviction

What Crime?

What Sentence?

What Jurisdiction?

Applicant Information

Last Name

First Name

Middle

United States Coast Guard Merchant Mariner Credentials

Please list all United States Coast Guard licenses and endorsements. Attach copies of all United States Coast Guard Merchant Mariner Credentials and supporting documentation.

Applicant Information

Last Name

First Name

Middle

Education

Please list any and all degrees and diplomas that you have earned.

Name and Address of College or University

Degree Earned

Year Earned

Name and Address of College or University

Degree Earned

Year Earned

Name and Address of College or University

Degree Earned

Year Earned

Please attach additional sheets as needed and include any and all verifying documentation.

Applicant Information

Last Name First Name Middle

Acknowledgment

 Initial •I have read the questions in this application and have answered them completely and truthfully to the best of my knowledge. I understand and acknowledge that any information provided may become public record subject to disclosure under the Public Records Act. I further acknowledge and agree that information and documentation submitted may be provided to the New Orleans and Baton Rouge Steamship Pilots Association and all of its members in consideration for selection into the Pilot Development Program.

 Initial •I have successfully completed the education required and the professional courses prescribed as indicated in the Board of Examiners' Rules and Regulations.

 Initial •I have the necessary and valid United States Coast Guard Merchant Mariner Credential and required licenses and endorsements, per the Board of Examiners' Rules and Regulations.

 Initial •I understand that any false representations on this application may disqualify me as an applicant, or result in a disciplinary hearing as per the Board of Examiners' Rules and Regulations.

 Initial •I understand that it is my responsibility to update this application when additional or new information is obtained.

 Initial •I understand this application is valid until the next Apprentice Pilot selection. I understand that I am solely responsible for submitting all required documentation requested in this application to the Board of Examiners.

STATE OF _____

PARISH/COUNTY OF _____

Signature Date

Subscribed and sworn to or affirmed before me this _____ day of _____, _____
Month Year

Notary Public

My commission expires _____

Seal or stamp must be affixed to each original

Applicant Information

Last Name

First Name

Middle

Board of Examiners' Date and Time Stamp

As a member of the Board of Examiners or their authorized representative, I confirm that I did receive this application at the date and time indicated below.

Date _____

Time _____

Signature _____

Applicant Information

Last Name

First Name

Middle

Application Check List

1. Application

- Obtain application from the Board
- Application shall be in writing/typed
- Application shall be signed by the applicant
- Application shall be presented to a member of the Board or their authorized representative by the applicant
- Appointment with an examiner or their authorized representative
- Application shall be notarized and accompanied by satisfactory proof of compliance with all of the Board's objective requirements

2. General Requirements

- Background check conducted by the Jefferson Parish Sheriff's Office
- Authorization forms
 - Authorization and Release - BOE Form 1 (attached)
 - Request for Drug and/or Breath Alcohol Test - BOE Form 2 (attached)
- Louisiana Voter Registration Card
- Current U.S.C.G. Merchant Mariner Physical Examination Report
- Bridge Resource Management Course Certificate
- Basic Ship Handling Course Certificate
- Radar Observer Certificate
- Advanced Fire Fighting Certificate
- Cardio Pulmonary Resuscitation Certificate
- Proof of negative drug screen test within 30 days prior to application submission

Applicant Information

Last Name

First Name

Middle

Application Check List (continued)

3. Licenses/Education/Experience

- Current First Class Pilots License, Any Gross Tons, upon the Lower Mississippi River from Chalmette, Louisiana to Baton Rouge Railroad and Highway Bridge at Baton Rouge, Louisiana, including physical, and, at least either:
- a. Master of Steam or Motor Vessels; or
 - b. Master of Towing Vessels; or
 - c. Third Mate; or
 - d. An equivalent or greater United States Coast Guard license.
- First Class pilotage from the Industrial Fore Bay, mile marker 92.7 AHP, to the Port Allen Fore Bay, mile marker 228.5 AHP.

Note: An applicant selected for the Pilot Development Program shall be required to obtain First Class pilotage from mile marker 88.0 AHP to Baton Rouge Railroad and Highway Bridge prior to commissioning.

- Bachelor's Degree

Note: Should the association choose to select entrants into the Pilot Development Program prior to January 1, 2018, applicants who hold at least a bachelor's degree from an accredited institution of higher learning may be presented to the association for consideration.

Applicants must provide certified copies of college and/or university transcripts, and/or certificates evidencing successful completion of all requirements outlined above.

AUTHORIZATION AND RELEASE

I (Name) _____ born at (City) , _____(State) _____
(County) _____ , on (Date of Birth) _____, (Social Security Number) _____,
having filed an application with the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi River
hereby consent to and authorize the Board of Examiners for New Orleans and Eaton Rouge Steamship Pilots for the Mississippi River to
do and obtain the following:

I consent to the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi River conducting an
investigation as to my moral character, professional reputation, and fitness to be a New Orleans and Baton Rouge Steamship Pilot. I
further agree to provide additional information which may be required concerning my past record. I understand that the contents of this
investigation are confidential and shall only be reported to the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for
the Mississippi River and the New Orleans and Baton Rouge Steamship Pilots Association for the purpose of making a determination
regarding my character, past record and fitness to become a New Orleans and Baton Rouge Steamship Pilot

I authorize and request every person, firm, company, corporation, association, court, school, college, university, other educational
institution, government agency, law enforcement agency, and any other agency having control of any records, files, documents, writings or
other information pertaining to me to furnish to the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for the
Mississippi River any such information regarding any and all (including those dismissed or otherwise erased or expunged by law, whether
formal or informal, pending or closed) charges, complaints, disciplinary actions, grievances, sanctions, suspensions, reprimands,
disqualifications, censures, resignations, terminations, citations, arrests, indictments, convictions, judgments, court martials, non-judicial
punishments, administrative discharges, or any other pertinent data or information pertaining to me. I further authorize the Board of
Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi River or any of its agents, representatives or counsel to
inspect and make copies of such documents, records, or other information.

I authorize the National Personnel Records Center in St. Louis, MO, or other custodian of my military record to release to the Board of
Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi River information or photocopies from my military
record.

I hereby release, discharge, and exonerate the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi
River and the New Orleans and Baton Rouge Steamship Pilots Association, its agents, representatives or counsel, and any person so
furnishing information from any and all liability of every nature and kind arising out of the furnishing or inspection of such documents,
records, and other information, or the investigation made by the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots
for the Mississippi River.

STATE OF _____

COUNTY/PARISH OF _____

Signature of Applicant

Subscribed and sworn to or affirmed before me this ____ day of (Month) _____, (Year) _____.

(Notary Public- Signature)

(Notary Public- Print)

My Commission expires _____

-seal or stamp

Global Safety Network
in alliance with
Premier Occupational Medicine, L.L.C.
2821 Richland Avenue, Suite 100
Metairie, Louisiana 70002
Telephone: (504) 889-9848
Facsimile: (504) 889-9844

APPLICANT - HAND CARRY THIS FORM TO PREMIER OCCUPATIONAL MEDICINE, L.L.C.'S OFFICE

REQUEST FOR DRUG AND/OR BREATH ALCOHOL TEST

Please collect the below indicated specimen(s). The collection procedures MUST follow that of Premier Occupational Medicine, L.L.C. that are indicated in your files.

The test(s) is being requested on (APPLICANT NAME) _____; By: Board of Examiners for New Orleans - Baton Rouge Steamship Pilots for the Mississippi River.

If you should have any questions regarding these procedures, call Premier Occupational Medicine, L.L.C. at (504) 889-9848.

18 Professional Panel: Please take a SPLIT specimen for a Professional Panel

Hair Test: Please take ONE specimen for a HAIR TEST

Reason for test(s): Board of Examiners for New Orleans - Baton Rouge Steamship Pilots for the Mississippi River - Application

Note To Donor/Applicant: Please remit payment to Premier Occupational Medicine, L.L.C. for these tests at the time of collection. The fee for these tests are determined by Premier Occupational Medicine, L.L.C. Please allow 4 days for results to be reported. It is the Donor's/Applicant's responsibility to provide the test results to the Board of Examiners for New Orleans - Baton Rouge Steamship Pilots for the Mississippi River at the time the Donor's/Applicant's application is submitted to the Board.