## APPRENTICE 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 - Baton Rouge 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.

Initial $\qquad$ I understand I am solely responsible for submitting all required documentation requested in this application to the Board of Examiners.

Initial $\qquad$ I understand I have an affirmative obligation to notify the Board of Examiners, in writing, of any change in this application.

Initial $\qquad$ I understand this application is valid until the next apprentice selection.

## 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 Code |  |  |  |
| Primary Phone Number |  |  |  |
| Email Address |  |  |  |

## Applicant Information



## Current Employment Information

Business/Firm Name $\qquad$
Address

City

Current Position $\qquad$ Years Employed $\qquad$

## Employment History

Please list all previous employers.

1) Business/Firm Name

Address

City
Position Held
State $\qquad$ Zip Code $\qquad$
$\qquad$ Years Employed $\qquad$
2) Business/Firm Name

Address

City
State
Zip Code $\qquad$
Position Held $\qquad$ Years Employed $\qquad$
3) Business/Firm Name

Address

City
Position Held
$\qquad$ State
Zip Code $\qquad$
$\qquad$ Years Employed $\qquad$
4) Business/Firm Name

Address

City
Position Held $\qquad$ Years Employed $\qquad$

## Applicant Information



## Background Information

1) Have you ever had any action taken against your driver's license, including but not limited to, suspension and/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(s) and/or revocation(s)? If yes, please explain.
$\square$
3) Have you been a registered voter of the State of Louisiana for the past 2 years?
4) Have you been convicted of any crime other than minor traffic violations within the Yes
last 10 years?
If yes, continue:
Date of Conviction
What Crime?
What Sentence?
What Jurisdiction?

Date of Conviction
What Crime? $\square$
What Sentence?


What Jurisdiction?

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

## Applicant Information

Last Name $\square$ First Name $\square$ Middle $\square$

## Education

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

Name and Address of College or University


Degree Earned $\square$ Year Earned

Name and Address of College or University


Name and Address of College or University


Please attach additional sheets as needed and include any and all verifying documentation.
$\square$ First Name $\square$ Middle

## Acknowledgment

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

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

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 any false representations on this application may disqualify me as an applicant and/or Apprentice Pilot, or result in a disciplinary hearing as per the Board of Examiners' Rules and Regulations.
_ I understand 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 I am solely responsible for submitting all required documentation requested in this application to the Board of Examiners.

STATE OF
PARISH/COUNTY OF $\qquad$
$\overline{\text { Signature }} \overline{\text { Date }}$

Subscribed and sworn to or affirmed before me this $\qquad$ day of $\qquad$ -

## Notary Public

My commission expires $\qquad$ -seal or stamp-

## Applicant Information

## Last Name

$\square$

As a member of the Board of Examiners or their authorized representative, I confirm I received this application on the date and time indicated below.

Date $\qquad$

Time $\qquad$

Name (Print) $\qquad$

Name (Sign) $\qquad$


## Application Check List

## 1. Application

$\square$ Obtain application from the Board
$\square$ Application shall be in writing/typed
$\square$ Application shall be signed by the applicant
$\square$ Application shall be presented to a member of the Board or their authorized representative
$\square$ 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

Authorization forms
$\square$ Authorization and Release - BOE Form 1 (attached)
$\square$ Request for Drug and/or Breath Alcohol Test - BOE Form 2 (attached)Background check conducted by the Jefferson Parish Sheriff's OfficeLouisiana Voter Registration Card


Current U.S.C.G. Merchant Mariner Physical Examination ReportBridge Resource Management Certificate
$\square$ Basic Ship Handling CertificateRadar Observer CertificateAdvanced Fire Fighting CertificateCardiopulmonary Resuscitation Certificate
Proof of negative drug screen test within 30 days prior to application submission

## Applicant Information

Last Name $\square$ First Name $\square$ Middle $\square$

## 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. $\square$ Master of Steam or Motor Vessels; or
b. $\square$ Master of Towing Vessels; or
c. $\square$ Third Mate; or
d. $\square$ An equivalent or greater Unites States Coast Guard license.

First Class pilotage from mile marker 92.7 AHP to mile marker 225 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 or higher from an accredited maritime academy.
*Applicants submitting college and/or university course work in place of training certificates must provide certified copies of college and/or university transcripts, course syllabus and correspondence from college and/or university department head and/or professor evidencing successful completion of the substituted requirement outlined above.
I, (Name) $\qquad$ born at (City) $\qquad$ , (State) , (Parish/County)
$\qquad$ on (Date of Birth) $\qquad$ (Social Security Number) $\qquad$ , having filed an application with the Board of Examiners for New Orleans - Baton Rouge Steamship Pilots for the Mississippi River (hereinafter "Board of Examiners") hereby consent to and authorize the Board of Examiners to do and obtain the following:

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

I hereby release, discharge and exonerate the Board of Examiners and/or any of its agents, representatives or counsel, the New Orleans - Baton Rouge Steamship Pilots Association and/or any of its agents, representatives, counsel or members, 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 conducted by the Board of Examiners.

## STATE OF

## PARISH/COUNTY OF

## APPLICANT - PRINT

Subscribed and sworn to or affirmed before me this $\qquad$ day of (Month) $\qquad$ (year) $\qquad$ .

NOTARY PUBLIC - PRINT

NOTARY PUBLIC - SIGNATURE
-seal or stamp-

My commission expires $\qquad$

Fastest Labs of Metairie
1501 Edwards Avenue, Suite 1
New Orleans, Louisiana 70123
Telephone: (504) 766-0880
Website: www.fastestlabs.com/metairie

## REQUEST FOR DRUG AND/OR BREATH ALCOHOL TEST

Please collect the below indicated specimens. The collection procedures MUST follow that of Global Safety Network/NOBRA-Apprentice.

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

If you should have any questions regarding these procedures, call Fastest Labs of Metairie at (504) 766-0880.

$\square$
18 Professional Panel:
$\square$ Hair Test:
Reason for test(s):
BOE - Apprentice Application (Check "Pre-Employment" on CCF)

Note To Donor/Applicant: Payment for these tests shall be made by credit card by the Donor/Applicant to Global Safety Network at 1 (866) 792-9808. Payment shall be made to Global Safety Network prior to the time of collection at Fastest Labs of Metairie. The fees for these tests are set by Global Safety Network and the total price of these services is $\$ 250.08$. Please allow 4 days for the results to be reported. It is the Donor's/Applicant's responsibility to provide test results to the BOE at the time the Donor's/Applicant's application is submitted to the BOE.

