



**B E R M U D A**  
**S L O O P**  
 F O U N D A T I O N

# SPIRIT OF BERMUDA EMPLOYMENT APPLICATION

PLEASE PRINT CLEARLY IN BLUE OR BLACK INK

## POSITION DETAILS

Position applying for: \_\_\_\_\_ My CV is attached  Yes  No

### Position Type

Permanent  
 Temporary

Part-time  
 Full-time

Other: \_\_\_\_\_

Available Start Date: \_\_\_\_\_ End Date (if applicable): \_\_\_\_\_

## APPLICANT INFORMATION (All Fields Required)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name(s): \_\_\_\_\_

Physical Address: \_\_\_\_\_ City / Parish: \_\_\_\_\_

State / Prov: \_\_\_\_\_ Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City / Parish: \_\_\_\_\_

State / Prov: \_\_\_\_\_ Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: (        ) \_\_\_\_\_ Personal Cell: (        ) \_\_\_\_\_

Work: (        ) \_\_\_\_\_ Work Cell: (        ) \_\_\_\_\_

Primary Email: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_ Marital Status: \_\_\_\_\_ Gender: M  F

1. Are you Bermudian: Y  N       2. Do you possess a Permanent Resident Certificate: Y  N

If you answered no to either of the above, please state Nationality: \_\_\_\_\_

BDA Social Insurance No: \_\_\_\_\_ Passport No: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

## CRIMINAL CONVICTIONS

Have you ever been convicted by a Court of Law? If yes, please give details.      No  Yes

\_\_\_\_\_  
 \_\_\_\_\_

## EDUCATION HISTORY

School, College, Universities attended	Full Time/ Part Time	Start Date (MM/YY)	Finish Date (MM/YY)	Qualification Obtained
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## PROFESSIONAL QUALIFICATIONS

Do you have any professional qualifications (First Aid, CPR, CIM, etc)? If yes, please complete below:

Qualification	School/Institute	Date of Completion
_____	_____	_____
_____	_____	_____
_____	_____	_____

### MARINE OCCUPATION LICENCES

Are you applying for employment as professional crew?  No  Yes (please complete below)

Issued by <small>(MCA, USEG, Marine &amp; ports etc.)</small>	Tonnage	Area <small>(coastal, offshore, ocean)</small>	Expiration Date
_____	_____	_____	_____
_____	_____	_____	_____

Radio License (MROP, GMDSS etc): \_\_\_\_\_

Endorsements (STCW, Radar, Sail etc): \_\_\_\_\_

## PREVIOUS EMPLOYMENT

### CURRENT

Company Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No: \_\_\_\_\_ Email Address: \_\_\_\_\_

Start Date (MM/YY): \_\_\_\_\_ Finish Date (MM/YY): \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## PREVIOUS EMPLOYMENT CONTINUED...

### PREVIOUS

Company Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No: \_\_\_\_\_ Email Address: \_\_\_\_\_

Start Date (MM/YY): \_\_\_\_\_ Finish Date (MM/YY): \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

### PREVIOUS

Company Name: \_\_\_\_\_ Position Held: \_\_\_\_\_

Address: \_\_\_\_\_

Contact No: \_\_\_\_\_ Email Address: \_\_\_\_\_

Start Date (MM/YY): \_\_\_\_\_ Finish Date (MM/YY): \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## REFERENCES

### PERSONAL

Name: \_\_\_\_\_ Company: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Email: \_\_\_\_\_ Contact No: (        ) \_\_\_\_\_

### PROFESSIONAL

Name: \_\_\_\_\_ Company: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Email: \_\_\_\_\_ Contact No: (        ) \_\_\_\_\_

## APPLICATION AGREEMENT

For the purpose of consideration of this application for a position with the Bermuda Sloop Foundation:

- i) I understand the completion of this application form does not constitute an offer of employment.
- ii) I certify that all statements and facts on this application form are true and any deliberate misrepresentation on my part will cause this application to be rejected, or if made apparent subsequent to my appointment, will result in immediate discharge.
- iii) I hereby authorize and give my consent to the Bermuda Sloop Foundation to obtain reference information from my present or past employers and any other persons I have listed for the purpose of assessment of my suitability to the post or posts applied for.
- iv) I hereby agree to conform to with the Rules and Regulations of the Bermuda Sloop Foundation while in its service.
- v) I will not disclose either during or at any time subsequent to my service or authorize the disclosure of any secret or confidential information or knowledge concerning any matter or thing of which I may become aware of relating to the participants or business of the Bermuda Sloop Foundation.
- vi) I understand that the Bermuda Sloop Foundation is subject to the Child Protection Act (2000) and I therefore give my consent for police background checks to be requested about me.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_