



**International Cruise Shops, Ltd.**  
**Doral Concourse**  
**8400 NW 36 Street, Suite 600**  
**Miami, FL 33166 USA**



**Application for Shipboard Employment**

**Please Print**

**All questions must be answered completely, or your application may be disqualified from further consideration. It's also important to attach a resume or curriculum vitae.**

**Please return your completed application, including any copies of certificates, licenses, letters of reference, transcripts, etc. to the attention of Shipboard Employment or through the Agent you're in communication with.**

Today's Date: \_\_\_\_\_ Hiring Agent: \_\_\_\_\_  
Month Day Year if applicable

**PERSONAL INFORMATION**

Name: \_\_\_\_\_  
Last (Surname) First (Given) Middle Initial

Permanent Address: \_\_\_\_\_  
Street (including Apt. # if applicable)

\_\_\_\_\_ City (Town) State/Province Mail Code Country

Home Telephone \_\_\_\_\_ Mobile (Cellular) \_\_\_\_\_  
Country Area Code Number Optional Country Area Code Number

E-mail Address: \_\_\_\_\_

Referred by: \_\_\_\_\_

May we contact you at work?  Yes When is the best time? \_\_\_\_\_  No

Passport Number \_\_\_\_\_ Issue Date \_\_\_\_\_ Exp. Date \_\_\_\_\_

Social Security Number \_\_\_\_\_ U.S. Citizen/U.S. Residents Only

Country of Birth \_\_\_\_\_ Nationality/Citizenship \_\_\_\_\_

Valid American VISA's (Transit/Seaman C-1/D, Tourist B-2)

Visa Type	Visa Number	Issue Date	Exp. Date
_____	_____	_____	_____
_____	_____	_____	_____

Do you have a valid Seaman's Book?  Yes  No (A requirement for certain assignments)

Have you ever worked at sea before?  Yes  No Position \_\_\_\_\_ / Dept. \_\_\_\_\_

Are you at least 21 years of age?  Yes  No (A legal requirement in order to complete liquor/tobacco sales)

Nearest Airport to home \_\_\_\_\_

Persons to notify in case of an emergency \_\_\_\_\_ Phone Number \_\_\_\_\_  
Country Area Code Number

Knowledge of English language skills: Fluent, Good, Fair, Slight. Speak \_\_\_\_\_ Write \_\_\_\_\_ Read \_\_\_\_\_

Please list any other language skills and level of fluency: Fluent, Good, Fair, Slight.

Language \_\_\_\_\_ Speak \_\_\_\_\_ Write \_\_\_\_\_ Read \_\_\_\_\_

Language \_\_\_\_\_ Speak \_\_\_\_\_ Write \_\_\_\_\_ Read \_\_\_\_\_

Language \_\_\_\_\_ Speak \_\_\_\_\_ Write \_\_\_\_\_ Read \_\_\_\_\_

Is there any reason why you may be denied entry to any country where a U.S. VISA is required?  Yes  No

If yes, please state country and reason why \_\_\_\_\_

Have you ever pled guilty or "no contest" to, or been convicted of a crime?  Yes  No

If yes, please provide the nature of the crime(s), country of jurisdiction where charges were pled, dates of charges, and any other information you care to disclose regarding the incident(s) \_\_\_\_\_

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

## GENERAL INFORMATION

How did you hear about us?  Advertising  Relative  Employee  Friend  Cruised on Vacation  
 Hiring Agent/Employment Agency \_\_\_\_\_  Website \_\_\_\_\_  
Other \_\_\_\_\_ Name

Do you have any relatives currently working for Starboard Cruise Services?  Yes  No

If yes, please state name and vessel they work on \_\_\_\_\_  
Name Vessel/Department

Have you ever submitted an employment application to Starboard Cruise Services before?  Yes  No

If yes, please provide date(s) \_\_\_\_\_  
Mo./Yr. Mo./Yr. Mo./Yr.

Have you ever been employed with Starboard Cruise Services before?  Yes  No

If yes, please state position held and dates of employment \_\_\_\_\_  
Position Held

From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.

Have you ever worked with any Cruise Line in any other department?  Yes  No

From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.

If yes, please state Cruise Line/department/concession \_\_\_\_\_

If yes, what was your Crew ID Number? \_\_\_\_\_

Date you are able to start work \_\_\_\_\_ after giving notice to current job, or proper closures  
Month Day Year before embarking on a shipboard contract.

If presently employed, how much notice do you need to give your employer? (\_\_\_\_\_) weeks.

## PHYSICAL FITNESS DATA (requirement in order to fulfill job duties)

**Prior to beginning employment, all applicants who are offered employment must complete and pass a fitness for duty physical examination including a drug test. All offers of employment are contingent and conditional on successful completion of the foregoing examination and drug test.**

Can you swim?  Yes  No Can you lift 55 lbs. (22.67 Kg/3.57 stone)?  Yes  No  
If yes, do you have a swimming certificate?  Yes  No Do you smoke?  Yes  No  
Do you have a rowing certificate?  Yes  No (Some vessels may be designated as "non-smoking")

## JOB RELATED INFORMATION

Do you have retail experience?  Yes  No How long? \_\_\_\_\_

If yes, what merchandise have you sold? \_\_\_\_\_

What does the term "Add-On Sale" or "Second Sale" mean? \_\_\_\_\_

Do you have training (skills) in any of the areas listed below:

Jewelry  Fragrance  Giftware  Fashion  
 Watches  Cosmetics  Accessories  Visual Merchandising

Have you ever taken special courses related to the above?  Yes  No

Were certifications/licenses attained in any of the checked areas?  Yes  No

If yes, please specify \_\_\_\_\_

A shipboard employee's contract lasts 6 months. Are you able to complete a full contract term without disruption?  Yes  No

A shipboard employee may work extensive and irregular hours in any given week. Are you willing to work those hours?  Yes  No

## EDUCATION

What was your highest level of education achieved? \_\_\_\_\_

Name and address of school last attended \_\_\_\_\_

**EMPLOYMENT****Dates of Employment**

Starting with most recent first, account for last 10 years. Please do not omit any periods of time.

**1. Employer** \_\_\_\_\_  
Telephone \_\_\_\_\_

Address \_\_\_\_\_  
Street (including Apt.# if Applicable)

City (Town) \_\_\_\_\_ State (Province) \_\_\_\_\_ Mail Code \_\_\_\_\_ Country \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Immediate Supervisor and Title \_\_\_\_\_

Did you manage any staff?  Yes How many? \_\_\_\_\_  No

Please state reason why you left their employment \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.

\$ \_\_\_\_\_ \$ \_\_\_\_\_  
Beginning Salary Ending Salary

Responsibilities of the job: \_\_\_\_\_

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

**2. Employer** \_\_\_\_\_  
Telephone \_\_\_\_\_

Address \_\_\_\_\_  
Street (including Apt.# if Applicable)

City (Town) \_\_\_\_\_ State (Province) \_\_\_\_\_ Mail Code \_\_\_\_\_ Country \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Immediate Supervisor and Title \_\_\_\_\_

Did you manage any staff?  Yes How many? \_\_\_\_\_  No

Please state reason why you left their employment \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.

\$ \_\_\_\_\_ \$ \_\_\_\_\_  
Beginning Salary Ending Salary

Responsibilities of the job: \_\_\_\_\_

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

**3. Employer** \_\_\_\_\_  
Telephone \_\_\_\_\_

Address \_\_\_\_\_  
Street (including Apt.# if Applicable)

City (Town) \_\_\_\_\_ State (Province) \_\_\_\_\_ Mail Code \_\_\_\_\_ Country \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Immediate Supervisor and Title \_\_\_\_\_

Did you manage any staff?  Yes How many? \_\_\_\_\_  No

Please state reason why you left their employment \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.

\$ \_\_\_\_\_ \$ \_\_\_\_\_  
Beginning Salary Ending Salary

Responsibilities of the job: \_\_\_\_\_

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

**4. Employer** \_\_\_\_\_  
Telephone \_\_\_\_\_

Address \_\_\_\_\_  
Street (including Apt.# if Applicable)

City (Town) \_\_\_\_\_ State (Province) \_\_\_\_\_ Mail Code \_\_\_\_\_ Country \_\_\_\_\_

Starting Job Title \_\_\_\_\_ Ending Job Title \_\_\_\_\_

Immediate Supervisor and Title \_\_\_\_\_

Did you manage any staff?  Yes How many? \_\_\_\_\_  No

Please state reason why you left their employment \_\_\_\_\_

May we contact this employer for a reference?  Yes  No

From \_\_\_\_\_ To \_\_\_\_\_  
Mo./Yr. Mo./Yr.

\$ \_\_\_\_\_ \$ \_\_\_\_\_  
Beginning Salary Ending Salary

Responsibilities of the job: \_\_\_\_\_

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

## References

List 4 references (excluding family members) that we may contact

Name \_\_\_\_\_

Relation to you \_\_\_\_\_ Years known \_\_\_\_\_

Phone \_\_\_\_\_ Best time to call \_\_\_\_\_  
Country Area Code Number

---

Name \_\_\_\_\_

Relation to you \_\_\_\_\_ Years known \_\_\_\_\_

Phone \_\_\_\_\_ Best time to call \_\_\_\_\_  
Country Area Code Number

---

Name \_\_\_\_\_

Relation to you \_\_\_\_\_ Years known \_\_\_\_\_

Phone \_\_\_\_\_ Best time to call \_\_\_\_\_  
Country Area Code Number

---

Name \_\_\_\_\_

Relation to you \_\_\_\_\_ Years known \_\_\_\_\_

Phone \_\_\_\_\_ Best time to call \_\_\_\_\_  
Country Area Code Number

## Applicant Statement

I certify that all information I have provided in this Application for Shipboard Employment in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any application from consideration for employment.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that there is a 90-day probation period, which I must successfully complete.

I understand that my employment can be terminated at any time during this period for not adhering to rules and regulations set forth by International Cruise Shops and the Cruise Line, which I would be assigned to.

I also understand that if I am hired, I will be required to provide valid passport and any visas, which are required to work on or join a vessel.

### PRE-EMPLOYMENT DRUG SCREENING

International Cruise Shops is interested in the protection and safety of its workforce. To ensure that safety, prospective employees are required to take a pre-employment drug test to provide assurance that they are free of illegal drugs.

### DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_  
Month Day Year