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. 				
• 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 Inform	
Last Name		First Name	Middle
		Current Employment I	nformation
Business/Firm Nam	e		
Address			
City		State	Zip (+4 optional)
Current Position			Years Employed
Are you currently Yes	7	O.T. approved random drug	
		Employment Hi	story
Please list all pre	vious employers _		
1) Business/Firm	Name		
Address			
City/State/Zip	(+4 optional)		
Position Held			Years Employed
2) Business/Firm Address	Name		
City/State/Zip	(+4 optional)		
Position Held			Years Employed
3) Business/Firm Address	Name		
City/State/Zip	(+4 optional)		
Position Held			Years Employed
4) Business/Firm	Name		
Address			
City/State/7in	(+4 optional)		
city, state, 2.p	_		

	Applicant Information				
Last Name	Applicant Information 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.				
	had any action taken against your United States Coast Guard Merchant Mariner	Credential,			
including but not lin	mited to suspension or revocations? If yes, please explain.				
3) Have you been a	a registered voter of the State of Louisiana for the past 2 years? Yes	□ No □			
4) Have you ever be If yes, continue:	een convicted of any crime other than minor traffic violations? Yes	No 🗆			
Date of Conviction					
What Crime?					
What Sentence?					
What Jurisdiction?					
Date of Conviction					
What Crime?					
What Sentence?					
What Jurisdiction?					

Applicant Information Middle Last Name First Name **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	
Diagon list any and all degrees	and diplomas that you have somed	
riedse list driv drid dii degrees a	and diplomas that you have earned.	
Name and Address of College or	University	
Degree Earned		Year Earned
lame and Address of College or	University	
Degree Earned		Year Earned
lame 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 N	lame	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 comp prescribed as indicated in th 				essional courses
Initial	•I have the necessary and v required licenses and endors				
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	\cdot I understand that it is my responsibility to update this application when additional or new information is obtained.				
Initial	\dot{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				
	/COUNTY OF				
Signature Date					
Subscribed and sworn to or affirmed before me this		e me this	day of	, _ Month	Year Year
Notary	Public				
My con	nmission expires				
			Seal or star	mp must be affix	ed to each original

Applicant Information			
Last Name	First Name	Middle	
	Board of Examiners' Date and	d 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.			
DateSignature	Time		

	Applicant Information				
	st Name Middle				
	Application Check List				
1.	pplication				
	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.	eneral 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/Educ	ication/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 e	equivalent or greater Unites States Coast Guard license.		
	lass pilotage from the Industrial Fore Bay, mile marker 92.7 AHP, to the Port Allen Fore nile marker 228.5 AHP.		
First C	An applicant selected for the Pilot Development Program shall be required to obtain Class pilotage from mile marker 88.0 AHP to Baton Rouge Railroad and Highway prior to commissioning.		
Note: S prior t accred	lor's Degree Should the association choose to select entrants into the Pilot Development Program to January 1, 2018, applicants who hold at least a bachelor's degree from an lited institution of higher learning may be presented to the association for eration.		

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)
	Birth), (Social Security Number)
	miners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi River
hereby consent to and authorize the Board of Exan	niners 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 C	Orleans and Baton Rouge Steamship Pilots for the Mississippi River conducting an
investigation as to my moral character, profession	nal reputation, and fitness to be a New Orleans and Baton Rouge Steamship Pilot. I
further agree to provide additional information wh	ich may be required concerning my past record. I understand that the contents of this
investigation are confidential and shall only be repo	orted to the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for
the Mississippi River and the New Orleans and B	aton Rouge Steamship Pilots Association for the purpose of making a determination
regarding my character, past record and fitness to be	ecome a New Orleans and Baton Rouge Steamship Pilot
institution, government agency, law enforcement agother information pertaining to me to furnish to the Mississippi River any such information regarding a formal or informal, pending or closed) charges disqualifications, censures, resignations, termination punishments, administrative discharges, or any other contents of the contents	apany, corporation, association, court, school, college, university, other educational gency, and any other agency having control of any records, files, documents, writings of the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for the my and all (including those dismissed or otherwise erased or expunged by law, whether, complaints, disciplinary actions, grievances, sanctions, suspensions, reprimands ons, citations, arrests, indictments, convictions, judgments, court martials, non-judicial ther pertinent data or information pertaining to me. I further authorize the Board of miship Pilots for the Mississippi River or any of its agents, representatives or counsel to s, or other information.
	in St. Louis, MO, or other custodian of my military record to release to the Board of amship Pilots for the Mississippi River information or photocopies from my military
River and the New Orleans and Baton Rouge Ste furnishing information from any and all liability or	d of Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi eamship Pilots Association, its agents, representatives or counsel, and any person so f every nature and kind arising out of the furnishing or inspection of such documents, made by the Board of Examiners for New Orleans and Baton Rouge Steamship Pilots
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

BOE FORM 1

Global Safety & Security Inc.

America's Pioneer in Drug Free Workplace Services
4713 Trenton Street
Metairie, LA 70006
Phone (24hrs) (504) 454-6933
Fax (504) 454-6934
FEDERAL ID #72-0960035
www.globalsafety.net

APPLICANT - HAND CARRY THIS FORM TO GLOBAL SAFETY'S OFFICE REQUEST FOR DRUG AND/OR BREATH ALCOHOL TEST

Please collect the below in indicated in your files.	dicated specimen(s). The collection procedures MUST for	Collow that of Global Safety & Security, Inc. that are
	d on (APPLICANTNAME)ilots for the Mississippi River.	; By: Board of Examiners for New Orleans and
, , ,	estions regarding these procedures, call Global Safety & urs only) or fax us at (504) 454-6934.	Security, Inc. at (504) 454-6933 (24 hour number), 1
] 18 Professional Panel:	Please take a SPLIT specimen for a Professional Panel	
] Hair Test:	Please take <u>ONE</u> specimen for a HAIR TEST.	
Reason for test:	Board of Examiners for New Orleans and Baton Rouge	Steamship Pilots for the Mississippi River - application
Note to Donor/Applicant:		

Please remit payment to Global Safety & Security, Inc. for these tests at the time of collection. The fee for both tests is \$200.00 cash, money order or certified check. Please allow 4 days for results to be reported. The results of these tests will be automatically reported to Captain Robert D. Heitmeier, President, Board of Examiners for New Orleans and Baton Rouge Steamship Pilots for the Mississippi River.

BOE FORM 2