

### **OREGON BOARD OF MARITIME PILOTS**

# Application for Columbia River Bar Pilot Trainee Selection

Send completed application to: Oregon Board of Maritime Pilots, 800 N.E. Oregon St. #507, Portland OR 97232

PERSONAL INFORMATION				
Name (Print)	Telep	hone		
Present Address	Email_			
I	EXPERIENCE			
How many months can you document, by USCG Certif master of vessels of 5,000 gross tons or over?:		•	~	
Has at least 6 months of this experience been obtained	d within the last 3	years p	rior to application?    Yes    No	
Other non-seagoing employment in the past ten ye may attach a resume.)	ars: (Start with I	most red	cent employer, or in the alternative, you	
Company Position Type	of Work		Length of Employment	
Previous Piloting Experience:				
USCG License:				
License Number (please provide copy):			Issue Number:	
Pilotage endorsements:				
Has your license ever been suspended or revoked?	□ Yes	□ N	0	
Please explain.				
Lleve very second in the LLC. Arrest Ferrer 2	D. Van		- Kara basab	
Have you ever served in the U.S. Armed Forces?	☐ Yes Date Entered_		o If yes, branch	

#### **REFERENCES**

Please have three references submit a Character and Fitness Form (attached)

You are encouraged to provide on a separate sheet any additional information such as special skills, certifications, training, management experience, equipment operation, or qualifications you feel will be helpful to us in considering your application.

#### **APPLICANT'S AGREEMENT AND CERTIFICATION**

disclosure under Oregon's public records law (ORS Chapte application be kept confidential, and exempted from public I understand that nothing contained in this application acceptance as a bar pilot trainee.		tained in this ). ise or guarantee of
Signature	Date	
AFFIRMATIVE ACTION - NONDISCRIMINATION		

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Your answers are strictly voluntary and will help in carrying out a statewide affirmative action program. Your answers will not be used in considering the merits of your application.

□African-American	□Hispanic	□Male
□Asian	□Native American	□Femal
□Caucasian	<b>□</b> Other	

## **CHARACTER & FITNESS VERIFICATION FOR PILOT TRAINEE LICENSURE**

Appli Date	icant Nam :	e:			
Refer			o, and Business/Em		
1.	Describe	your business c	or place of employing you had with the c	ment and the natu	ure of the
2.	_		d did you work with End MM/		_
3.	Please ra		nt on the following:		
		Excellent	Very Good	Satisfactory	Unsatisfactory
Technical Competer	nce				
Profession	al				
Integrity					
Profession					
<u>Judgment</u>					
Ability to W					
<u>w/Colleac</u> Ability to W					
w/Subordi					
Ability to W					
w/Clients					
Com	ments:				
4.			ations concerning : e-licensed maritime		is applicant's
5.	Would yo	ou employ the	applicant in a lead	ership position?	

6.	Would you employ the applicant in a position of trust?
7.	Describe the applicant's greatest strengths.
8.	Describe the area(s) where the applicant has the most room for growth.
9.	Was the applicant ever disciplined professionally, including performance or personnel warnings? Was the applicant ever placed on probation?
10.	Is there anything else the Board should know when evaluating the applicant for state pilot trainee licensure?