



## APPLICATION FOR STATE OF WASHINGTON MARINE PILOT EXAMINATION

*I would accept an invitation to train for licensure in:*

Grays Harbor District only \_\_\_\_\_ Puget Sound District only \_\_\_\_\_ Either District \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Last

Mailing Address \_\_\_\_\_

Street Address \_\_\_\_\_  
City State Zip Code

Date of Birth \_\_\_\_\_ U.S. Citizen: Yes \_\_\_\_\_ No \_\_\_\_\_ Washington State Resident: Yes \_\_\_\_\_ No \_\_\_\_\_

Social Security Number \_\_\_\_\_ Primary contact phone # \_\_\_\_\_  
(Required for background check)

E-mail \_\_\_\_\_

Alternate contact information \_\_\_\_\_

### **EMPLOYMENT HISTORY – Most recent six years (Use additional sheets if necessary)**

Present Employer \_\_\_\_\_  
Company Name Address

Hire Date \_\_\_\_\_ Immediate Supervisor \_\_\_\_\_ Phone number \_\_\_\_\_

Previous Employer \_\_\_\_\_  
Company Name Address

From \_\_\_\_\_ to \_\_\_\_\_  
Employment Dates (mo/yr) Immediate Supervisor Phone number Reason for Leaving

Previous Employer \_\_\_\_\_  
Company Name Address

From \_\_\_\_\_ to \_\_\_\_\_  
Employment Dates (mo/yr) Immediate Supervisor Phone number Reason for Leaving

Have you ever been convicted of any offense involving drugs or the personal consumption of alcohol?

No \_\_\_ Yes \_\_\_ Please detail, including date(s): \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor?

No \_\_\_ Yes \_\_\_ Please detail, including date(s): \_\_\_\_\_

Have you ever been directly involved in a marine incident resulting in a US Coast Guard investigation?

No \_\_\_ Yes \_\_\_ Please detail, including date(s). \_\_\_\_\_

Have you ever had a marine or motor vehicle driver's license revoked or suspended or limited in any jurisdiction?

No \_\_\_ Yes \_\_\_ Please detail, including date(s) \_\_\_\_\_

Have you ever had an action taken against your U. S. Coast Guard License?

No \_\_\_ Yes \_\_\_ Please detail, including date(s). \_\_\_\_\_

**CHECK LIST**

\_\_\_\_\_ **Attach copies of documented sea-service time and experience.**

\_\_\_\_\_ **Attach a complete copy (all pages) of valid U S Coast Guard license with current radar, and any Grays Harbor or Puget Sound pilotage endorsements.**

\_\_\_\_\_ **Attach (3) letters of reference from previous employers.**

\_\_\_\_\_ **Attach (3) letters of reference from previous vessel Masters you have worked with.**

\_\_\_\_\_ **Attach a check for \$400 (nonrefundable) made payable to Washington State Treasurer.**

Willful misrepresentation of such required information by a pilot applicant shall result in disqualification of the applicant.

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct. I further authorize the above-listed employers to release any relevant information requested by the Board as part of this application process. I also give permission to the Board to do a background check as necessary to verify any information stated in this application and attached documents.

Print Name

Sign Name

Date

**MAIL OR DELIVER COMPLETED APPLICATION, WITH ORIGINAL SIGNATURE AND ALL ATTACHMENTS TO:**

Board of Pilotage Commissioners  
2901 Third Avenue, Suite 500  
Seattle, WA 98121

**ELECTRONIC OR FAXED SUBMISSIONS  
WILL NOT BE CONSIDERED VALID**

For Agency use only.