

VESSEL MERIT PROGRAM APPLICATION

NOTE: NOAA Wage Marine employees are required to use this form for VMP announcements. Resumes are no longer required.

Section 1 – GENERAL APPLICANT INFORMATION: Please print or type the information below.

LAST NAME			FIRST NAME		DATE
ADDRESS			E-MAIL ADDRESS		
			HOME PHONE		
CITY	STATE	ZIP	CELL PHONE		

Section 2 – SHIP ASSIGNMENT PREFERENCE: Check each ship you are interested in.

Pacific Fleet			Atlantic Fleet		
<u>Newport, Oregon</u>			<u>Norfolk, Virginia</u>		
	HP	Class		HP	Class
Bell M. Shimada	3000	II	Thomas Jefferson	2550	II
Rainier	2400	II			
McArthur II	1600	III			
<u>Kodiak, Alaska</u>			<u>Northeast Region</u>		
Oscar Dyson	3000	II	Henry B. Bigelow	3000	II
			Ferdinand R. Hassler	2900	II
<u>Ketchikan, Alaska</u>			Okeanos Explorer	1600	III
Fairweather	2400	II	Delaware II	1230	IV
<u>Honolulu, Hawaii</u>			<u>Pascagoula, Mississippi</u>		
Hi'ialakai	1600	III	Pisces	3000	II
Ka'imimoana	1600	III	Gordon Gunter	1600	III
Oscar Elton Sette	1600	III	Oregon II	1800	III
<u>Southwest Region</u>			<u>Charleston, South Carolina</u>		
Rueben Lasker	3000	II	Ronald H. Brown	6000	IA
			Nancy Foster	1850	III
MOC Crew – Relief Pool		III			

SUBMIT A COPY OF CURRENT ENDORSEMENTS (MMD or MMC) WITH THIS FORM.
This Vessel Merit Program Application Form supersedes all previous editions, including attachments.

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Section 3 – OCCUPATIONAL INTEREST. Check the box for each position you would like to be considered for, current endorsements must support the request. You will only be considered for the positions you are qualified for on the ships that are indicated above. The following positions are covered under the Vessel Merit Promotion Program.

Engineering Department

Chief Marine Engineer
1st Assistant Engineer
2nd Assistant Engineer
3rd Assistant Engineer

Deck Department (Licensed)

Master
1st Officer
2nd Officer
3rd Officer

Deck Department (Unlicensed)

Chief Boatswain
Chief Boatswain (Fish)
Boatswain Group Leader
Lead Fisherman

Steward Department

Chief Steward
Chief Cook

Survey Department

Chief Survey Technician
Senior Survey Technician

Survey Department (Hydro)

Chief Hydro Survey Technician
Senior Hydro Survey Technician

Maintenance Department

Engineering Electronic Technician

Section 4 – U.S. COAST GUARD LICENSES and/or DOCUMENT INFORMATION: Provide all USCG Merchant Mariner Documents / Credentials, STCW, etc. for Deck and Engineering department positions. Provide all professional certifications, qualifications, training, Certificate of Registry, etc. for Steward, Survey, and Maintenance department positions.

License/ Certificate/Endorsement

Expiration Date

Limitations (if applicable)

Section 5 – SUMMARY OF SHIP ASSIGNMENTS: Indicate position(s) held and dates assigned for at least the last five (5) years. (if applicable)

Ship Assignment

Start Date

End Date

Position Assigned

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Section 6 – RELEVANT WORK EXPERIENCE: Indicate public or private sector work experience related to the job for which you are applying. Include all paid and non-paid positions held within the last five (5) years.

<u>Relevant Work Experience</u>	<u>Start Date</u>	<u>End Date</u>	<u>Position Assigned</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Section 7 – EDUCATION: Indicate all degrees and certificates received from any college, university or vocational technical school.

<u>Degree or Certificate</u>	<u>Year Received</u>	<u>Name of School</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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Section 8 – PROFESSIONAL MARITIME HONORS, AWARDS AND SPECIAL ACCOMPLISHMENTS: List all professional maritime honors and awards received from any government, military or recognized professional maritime organization.

<u>Type of Honor or Award</u>	<u>Year Received</u>	<u>Synopsis of Accomplishment</u>

Section 9 – APPLICANT CERTIFICATION AND RELEASE OF INFORMATION: I certify, to the best of my knowledge and belief, that all of the information on and attached to this application is true, correct, and complete, and made in good faith. I understand that false or fraudulent information on or attached to this application may be grounds for termination and may be punishable by fine or imprisonment. I understand that any information I give may be investigated. I consent to the release of information about my physical ability and fitness by employers, schools, law enforcement agencies, other individuals and organizations, to investigators, Human Resources personnel and other authorized employees of the Federal Government.

EMPLOYEE NAME	EMPLOYEE SIGNATURE	DATE
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Workforce Management Office – (For Official Use Only)

<p><i>WFMO Rating Codes</i></p> <p>Q Qualified</p> <p>NQ Not Qualified</p> <p>R Not Qualified – may qualify within a year</p> <p>L Will qualify if license is upgraded</p>	<p>ASSIGNED CODE</p> <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div>
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DATE RATED		DATE ASSIGNED		WFMO REPRESENTATIVE SIGNATURE
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Privacy Sensitive. Any misuse or unauthorized disclosure may result in either civil or criminal penalties.