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PENNSYLVANIA DEPARTMENT OF STATE
BUREAU OF PROFESSIONAL AND OCCUPATIONAL AFFAIRS
Navigation Commission for the Delaware
River and It's Navigable Tributaries

TELEPHONE: (717) 783-7129
FAX: (717) 705-5540
WEBSITE: www.dos.pa.gov/navigation
EMAIL: ra-navcomm@pa.gov

2022 APPLICATION FOR APPOINTMENT AS APPRENTICE PILOT

Instructions: Please type or print in ink, except where a signature is required. Provide complete, correct responses and all supporting documents as requested on the application. You may attach additional sheets of 8.5 by 11-inch paper if you need additional space to respond. Please reference any response on an attached sheet to the corresponding section of the application. The Commission will not accept an application unless all the required responses are complete, and all required supporting documents are received timely. In order to be considered, a completed application must be post-marked or received at the above address on or before **November 30, 2022**, in-person; by mail or overnight delivery; or by emailing a signed copy to the Commission's Administrator at ra-navcomm@pa.gov.

SECTION I – GENERAL INFORMATION

IDENTIFYING AND CONTACT INFORMATION

1. Full Name: _____

_____ Last/Family
_____ First
_____ Middle
2. Other Names Used: None _____
(Include maiden, prior married, alternative spellings.)
3. Date of Birth (month/day/year): _____ Age: _____
4. Do you have a U.S. Social Security Number? Yes No
If yes, enter your SSN: _____
5. Permanent address: _____

_____ (Number/Street)
_____ (City)
_____ (State)
_____ (Zip)
6. Mailing Address (if different than permanent address listed above): _____

_____ City State
_____ Zip code
7. Daytime telephone: () _____ Cell phone: () _____
8. Email: _____

SECTION II– APPRENTICE QUALIFICATIONS

DESCRIPTION OF APPRENTICE DUTIES

The Joint Pennsylvania / Delaware Apprentice Pilot Training Program is a rigorous, full time, three or four year training program leading to licensure as a sixth class Pennsylvania Pilot. The comprehensive program combines academic instruction, off-site professional training and “hands on” practical experience. A joint Pennsylvania/Delaware Apprentice Pilot Training Committee comprised of ten licensed pilots oversees the program. Apprentices are tested on selected curriculum topics on a quarterly basis. Periodic attendance at off-site training and other professional activities is required. To complete the numerous program requirements within the allotted period, apprentice pilots are assigned to duty on the river observing and working with licensed pilots, to special shipboard duty with pilots in Philadelphia Harbor, to duty in the pilot launches and at the Delaware Vessel Traffic Information System tower. Additionally, apprentice pilots are responsible for obtaining federal pilotage for all routes to be piloted in the Delaware Bay and River and Chesapeake and Delaware Canal prior to the end of the program. A comprehensive state examination is given upon completion of program requirements.

DESCRIPTION OF PILOT DUTIES

A river pilot is the designated person who has been given the responsibility to be in charge of the movement of a vessel, while that vessel is within the inland waters of the United States of America. The pilot is responsible for the safe navigation of a vessel while it transits the Delaware River. Pilots are licensed by the Commonwealth of Pennsylvania to protect the environment and the economy of the whole Delaware Valley Community. While navigating the river, a pilot is responsible for handling all communication for the vessel and keeping that vessel within the main ship navigation channel.

EDUCATION

9. High School Attended: _____ Grade Completed: _____

10. Do you have a baccalaureate degree from an accredited college/university or U.S. operated maritime academy?

Yes No **If yes, enter the following information about your education and arrange for the Commission office to receive an official transcript. The transcript must be sent *directly* from the college/university or maritime academy to the Commission office or submitted with your application in a sealed envelope from the school. Transcripts shall be sent to the Department of State, Navigation Commission, PO Box 2649, Harrisburg, PA 17105 or ra-navcomm@pa.gov on or before November 30, 2022.**

SCHOOL	LOCATION	MAJOR/FIELD OF STUDY	DEGREE	YEAR DEGREE RECEIVED

CERTIFICATIONS AND LICENSURE

11. Do you hold a U.S. Coast Guard-issued license to serve as a third-mate on all oceans, as a master in near-coastal waters aboard vessels over 1600 tons, or any higher class license? Yes No

If yes, enter the highest U.S. Coast Guard license that you hold and submit a copy of the license: _____

12. Do you possess a valid driver's license? Yes No **If yes, enter the following information about the license:**
State: _____ License #: _____ Year Issued: _____ Status: _____

Has your driver's license ever been suspended or revoked? Yes No

13. Do you currently hold, or have *ever* held, a license to practice as a River Pilot – including an apprenticeship – in any other jurisdiction (state, U.S. territory or District of Columbia)? Yes No **If yes, list all licenses you have ever held.**

JURISDICTION	LICENSE NUMBER	IS THIS LICENSE CURRENT?
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>

Arrange for the Pennsylvania Navigation Commission office to receive a license verification (letter of good standing) sent directly from each jurisdiction listed above. They can be sent to the Department of State, Navigation Commission, PO Box 2649, Harrisburg, PA 17105 or ra-navcomm@pa.gov on or before November 30, 2022.

14. Have you ever previously applied to the Commission for an apprenticeship? Yes No

MILITARY HISTORY

15. Do you now or have you ever served in a U.S. military organization? Yes No

Branch of Service _____ Dates of Service _____

Service Number: _____

MARITIME EXPERIENCE

16. Please describe your previous maritime/water travel experience, if any: _____

WORK HISTORY

17. List your employment history for at least *five* years. Start with your current position and work backwards.

If you need more room, enter information on a separate sheet.

POSITION 1		
Start Date: _____	End Date: _____	Position: _____
Employer Name: _____		
Employer Address: _____		
Employer Telephone Number: _____		
Immediate Supervisor: _____		

POSITION 2		
Start Date: _____	End Date: _____	Position: _____
Employer Name: _____		
Employer Address: _____		
Employer Telephone Number: _____		
Immediate Supervisor: _____		

POSITION 3		
Start Date: _____	End Date: _____	Position: _____
Employer Name: _____		
Employer Address: _____		
Employer Telephone Number: _____		
Immediate Supervisor: _____		

18. Have you been fired from any job for any reason with in the last five years? Yes No

If yes, please explain: _____

REFERENCES

19. Please identify three individuals whom the Commission may contact for a personal reference:

Name: _____
Address: _____
Occupation: _____
Telephone Number & Email Address: _____
Years Known: _____

Name: _____
Address: _____
Occupation: _____
Telephone Number & Email Address: _____
Years Known: _____

Name: _____
Address: _____
Occupation: _____
Telephone Number & Email Address: _____
Years Known: _____

CRIMINAL HISTORY RECORD CHECK

20. Provide a recent Criminal History Records Check (CHRC) from the state police or other state agency **that is the official repository for criminal history record information** for every state in which you have lived, worked, or completed professional training/studies for the past five (5) years. The report(s) must be dated within 180 days of the date the application is submitted. For applicants living, working, or completing training/studies in Pennsylvania, please go to epatch.state.pa.us to request the record check. **Do not** request the Volunteer option as that is not acceptable. For individuals living, working, or completing training/studies outside of Pennsylvania during the past five (5) years, in lieu of obtaining individual state background checks, you may elect to provide BOTH a state CHRC from the state in which you currently reside, AND your FBI Identity History Summary Check, available at <https://www.fbi.gov/services/cjis/identity-history-summary-checks>.

Please note: For applicants currently living, working, or completing training/studies in California, Arizona, or Ohio: Due to the laws of these states, the Commission is not an eligible recipient of CHRC's or your CHRC will not be issued to you for upload to the Commission. Please obtain your Federal Bureau of Investigation (FBI) Identity History Summary Check, available at the link noted above.

DISCLOSURES

21. Do you currently have any criminal charges pending and unresolved in any state or jurisdiction?
Yes No **If yes, enclose a complete explanation and any documentation related to the charges.**
22. Have you had disciplinary action taken against a professional or occupational license, certificate, permit, registration, or other authorization to practice a profession or occupation issued to you in any state or jurisdiction or have you agreed to voluntary surrender in lieu of discipline?
Yes No **If yes, enclose a complete explanation and any documentation related to the disciplinary action.**
23. Do you currently have any disciplinary charges pending against your professional or occupational license, certificate, permit or registration in any state or jurisdiction??
Yes No **If yes, enclose a complete explanation and any documentation related to the disciplinary action.**
24. Have you withdrawn an application for a professional or occupational license, certificate, permit or registration, had an application denied or refused, or for disciplinary reasons agreed not to apply or reapply for a professional or occupational license, certificate, permit or registration in any state or jurisdiction?
Yes No **If yes, enclose a complete explanation and any related documentation.**
25. Do you currently engage in, or have you ever engaged in, the intemperate or habitual use or abuse of alcohol or narcotics, hallucinogenics or other drugs or substances that may impair judgment or coordination?
Yes No **If yes, submit a letter explaining fully. Include copies of all appropriate records.**

SECTION III – MISCELLANEOUS

26. I affirm that I have read the Job Announcement of Apprentice Pilot Openings for 2022. I understand that the Apprentice Pilot position is not a salaried job, and that Apprentice Pilots receive a stipend in the amount listed in the job announcement.
Yes No

(b) Is there anything which would interfere with your attending the apprenticeship program regularly?

Yes No If yes, please explain: _____

27. Please provide any other information that you believe may be relevant to your application.

28. List any specific courses, classes, or training you have completed in the following subjects:

- Maritime pursuits (such as Sailing, Small Craft Handling, Navigation)
- Emergency procedures (such as First aid, CPR, Fire Fighting, Life Saving, Search and Rescue, Abandon Ship)
- Management/Leadership (such as Management Training, Communication Skills, Administration, Team Building, Project Management)
- Maintenance and/or Operation of Large Engines/Machines

Do **not** include any courses that already appear on your college or academy transcript or any that are requirements for a U.S. Coast Guard license you hold.

SPONSOR	COURSE/TRAINING TITLE	LOCATION	DATES	
			To	From

29. List any hobbies or volunteer experiences related to the following.

- Maritime pursuits (such as Sailing, Boating, Crewing)
- Emergency procedures (such as Volunteer Fire Fighting, Rescue Squad)
- Management/Leadership (such as Leadership experience in a club, activity group or voluntary organization)
- Maintenance and/or Operation of Large Engines/Machines

Describe the experience as specifically as possible. For example, in describing maritime pursuits, explain the nature of the craft(s) and your activities. Include the duration of the experience.

HOBBY OR VOLUNTEER EXPERIENCE	DESCRIPTION

30. As you consider being accepted as an apprentice in an extensive supervised training program, use the columns in the table below to explain your strengths and needs in each area.

AREA	YOUR STRENGTHS	YOUR NEEDS
Maritime Experience		
Emergency Procedures		
Management and Leadership		
Maintenance and Operation of Large Engines/Machines		

31. Have you ever been involved in a boating or shipping accident where you were responsible for reporting it to the U.S. Coast Guard, your employer or another agency? Yes No If yes, describe the occurrence and attach a copy of the accident report.

SECTION IV – CERTIFICATION

I verify that this application is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information pursuant to 18 Pa. C.S. §4911.

I verify that the statements in this application are true and correct to the best of my knowledge, information, and belief. I understand that false statements are made subject to the penalties of 18 Pa. C.S. §4904 (relating to unsworn falsification to authorities) and may result in the suspension, revocation or denial of my license, certificate.

SOCIAL SECURITY ACT CERTIFICATION

In order to comply with federal law, the Navigation Commission is obligated to inform each applicant or licensee from whom it requests a social security number that disclosing such number is mandatory in order for this Board to comply with the requirements of the federal Social Security Act pertaining to Child Support Enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa. C.S. §4304.1(a). In order to enforce domestic support orders, at the request of the Commonwealth's Department of Human Services (DHS), the licensing boards must provide to DHS information prescribed by DHS about the licensee, including the social security number.

Applicant Signature: _____ *Date:* _____

Your application must be postmarked, hand-delivered or emailed to the address above no later than the deadline. If your application is rejected for any reason, you must re-submit the corrected application by the deadline.

The deadline for submitting applications is 11/30/2022.