

Seafarers International Union, Atlantic, Gulf, Lakes and Inland Waters, AFL-CIO  
5201 Auth Way ■ Camp Springs, MD 20746 ■ (301) 899-0675 ■ [www.seafarers.org](http://www.seafarers.org)

**Government Services Division Membership Application**

Please Print Clearly

Employing Agency:  Military Sealift Command (MSC)  National Oceanic & Atmospheric Administration (NOAA)  Army Corps of Engineers (ACOE)

Name: \_\_\_\_\_ Port Joined: \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Hire Date at Employing Agency: \_\_\_\_\_ Total Years: \_\_\_\_\_

Marital Status:  Single  Married  Divorced  Widow(er) Rating: \_\_\_\_\_ Department: \_\_\_\_\_

Street: \_\_\_\_\_ Are you a United States Citizen?  Yes  No

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Are you a Registered Voter?  Yes  No

Cell No.: \_\_\_\_\_ Home No.: \_\_\_\_\_ Are you a Veteran of the United States Armed Forces?  Yes  No

Gender: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ If yes, which Branch of Service? \_\_\_\_\_

Hair Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Did you complete the Standard Form 1187, which requests that SIU AGLIW, AFL-CIO's union dues be deducted from your pay?  Yes  No

Emergency Contact: \_\_\_\_\_ Did you complete the Life Insurance Form, which is reserved for eligible members of the SIU AGLIW, AFL-CIO's Government Services Division?  Yes  No  
Relationship to Emergency Contact: \_\_\_\_\_

Cell No.: \_\_\_\_\_ Home No.: \_\_\_\_\_

I solemnly swear that the statements on this application are true. Further, I solemnly swear that I do not believe in, and I am not a member of, nor do I support any organization that believes in or advocates the overthrow of the United States government, by force or by illegal or unconstitutional methods.

Further, I solemnly swear that I will support and defend the constitution of the United States against all enemies foreign and domestic: That I will bear true faith and allegiance to the same: And that I take this obligation freely without mental reservation or purpose of evasion: so help me God.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

**FOR PORT VERIFICATION ONLY**

Verified By: \_\_\_\_\_ Was the Standard Form 1187 submitted with this membership application?  Yes  No

Port: \_\_\_\_\_ Was the Life Insurance Form submitted with this membership application?  Yes  No

I certify that the above information is true and correct to the best of my knowledge and I have reviewed this application with the understanding that the Seafarers International Union, Atlantic, Gulf, Lakes and Inland Waters, AFL-CIO will rely on this information for its records.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

RPNC - 031 - 07/19

