**EXTENSION OF SHIPBOARD EMPLOYMENT AGREEMENT (“SEA”) FORM (v112113)**

Name (Print Full Name):

Steiner ID Number:

Ship:

Position:

Scheduled End of Contract:

Requested Extension Date (New End of Contract Request):

Reasons for Request:

**Conditions**

If approved, repatriation travel to the Gateway City on the employee’s file will now occur on the new end of contract and debark date, see below.

The company reserves the right to approve an extension request however may not agree to the requested extension date, as such the approved date will be shown below.

Please note that your tour of duty cannot exceed 11 months.

**Office Use Only**

Request Granted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ New End of Contract Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Request Declined:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized by (Print Name):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

BOS Updated on (Date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attach this form to the Shipboard Employment Agreement Extension Form