



APPLICATION FOR EMPLOYMENT

This application for employment is valid for 6 months. Please PRINT clearly and answer ALL questions thoroughly. Applications which are incomplete or unsigned will not be considered for employment. Flightstar Aircraft Services, Inc. is an Equal Opportunity Employer, and does not discriminate in employment-related areas on the basis of race, color, religion, creed, sex, sexual orientation, age, national origin, handicap, marital status or status as a Vietnam-era veteran or any other protected basis.

PERSONAL INFORMATION: How did you learn of this opening? [] newspaper [] friend [] relative [] other

Legal name: _____ Social Security # _____
LIST NAME EXACTLY AS SHOWN ON SOCIAL SECURITY CARD

Home address: _____
LIST STREET, APT. NUMBER IF APPLICABLE, CITY, STATE AND ZIP CODE. NO P.O. BOXES WILL BE ACCEPTED EXCEPT FOR RFDS

Home telephone: (_____) _____ Cell phone, beeper or # for messages: (_____) _____
(Circle one)

Position applied for: _____ Salary or rate expected: _____ Are you working now? [] Yes [] No

List any other positions in which you have an interest if your first choice is not available: _____

List any hours or days when you are NOT available to work: _____

Check ALL schedules for which you are available: [] full time [] part time [] shift work [] temporary

Are you currently on "lay-off" status and subject to recall? [] Yes [] No If YES, for what company? _____

Are you a contract employee from another company? [] Yes [] No If yes, what company? _____

Can you get to work reliably on time every day? [] Yes [] No If you are hired, could you travel some of the time? [] Yes [] No

On what date would you be available to begin? _____ If working now, how much notice must you give? _____

If a job is offered to you, would you be able to pass an FAA 10-year employment verification check? [] Yes [] No

For the purposes of complying with child labor laws, are you at least 18 years of age? [] Yes [] No

Only US citizens and aliens with a legal right to work in the US are eligible for employment. If you are offered a position can you submit appropriate documentation verifying your legal right to work in the United States? [] Yes [] No

Have you ever been convicted of a felony? [] Yes [] No (A conviction will not necessarily disqualify you from employment.)

If yes, give date(s) and charge(s). _____

Have you ever been employed by Flightstar Aircraft Services, Inc. before? [] Yes [] No Where/when? _____

Do you have relatives working for FAS? [] Yes [] No If yes, who/where? _____

YOUR AUTHORIZATION for Flightstar Aircraft Services, Inc. to check your references and for other companies to give information

All applicants for employment should be aware that no person will be offered a position with Flightstar Aircraft Services, Inc. until and unless all previous education, work experience and licenses listed in this application can be verified. Do you agree to hold Flightstar Aircraft Services, Inc. and its representatives harmless from liability for seeking, gathering and using such information, and do you agree to hold all previous employers, educational institutions, police agencies and regulatory agencies harmless for furnishing such information? SIGN BELOW IF YOU AGREE.

SIGNATURE OF APPLICANT: _____ Date: _____

PRINT YOUR NAME: _____ Social Security Number: _____

If you have used any other name in the past ten years (maiden name, previous married name, AKA) please list it/them here: _____

FOR COMPANY USE ONLY

Arrange Interview? [] Yes [] No Date interviewed: _____ Interviewed by: _____ Title: _____

DIRECTIONS: List **ALL** jobs held during the last **TEN YEARS**, regardless of location. List your most recently held job **FIRST** and then list in reverse order. Explain **ALL** gaps in employment of 30 days or more (for example "unemployed" or "attending school".) If you need more space to list all your previous jobs in the last ten years, ask for a "supplement sheet". Applications which do not list **ALL** jobs held in the last ten years will not be considered.

(1) CURRENT OR MOST RECENT JOB:

_____ from (month/year) _____ to (month/year) _____
NAME OF EMPLOYER

_____ Tel. no: (_____) _____
ADDRESS OF THE EMPLOYER, INCLUDING STREET, CITY, STATE AND ZIP CODE

My job title was: _____ My salary/rate was: _____

My supervisor's name was: _____ and his/her job title was: _____

I left this job (or plan to leave) because: _____

(2) AND BEFORE THAT I WORKED AT:

_____ from (month/year) _____ to (month/year) _____
NAME OF EMPLOYER

_____ Tel. no: (_____) _____
ADDRESS OF THE EMPLOYER, INCLUDING STREET, CITY, STATE AND ZIP CODE

My job title was: _____ My salary/rate was: _____

My supervisor's name was: _____ and his/her job title was: _____

I left this job (or plan to leave) because: _____

(3) AND BEFORE THAT I WORKED AT:

_____ from (month/year) _____ to (month/year) _____
NAME OF EMPLOYER

_____ Tel. no: (_____) _____
ADDRESS OF THE EMPLOYER, INCLUDING STREET, CITY, STATE AND ZIP CODE

My job title was: _____ My salary/rate was: _____

My supervisor's name was: _____ and his/her job title was: _____

I left this job (or plan to leave) because: _____

(4) AND BEFORE THAT I WORKED AT:

_____ from (month/year) _____ to (month/year) _____
NAME OF EMPLOYER

_____ Tel. no: (_____) _____
ADDRESS OF THE EMPLOYER, INCLUDING STREET, CITY, STATE AND ZIP CODE

My job title was: _____ My salary/rate was: _____

My supervisor's name was: _____ and his/her job title was: _____

I left this job (or plan to leave) because: _____

YOUR EDUCATION AND SPECIAL SKILLS

SCHOOL NAME

ADDRESS OF SCHOOL

Were you
GRADUATED?

DEGREE

HIGH SCHOOL (list above the line)

COLLEGE or UNIVERSITY (list above the line)

GRADUATE SCHOOL (list above the line)

TECHNICAL or TRADE SCHOOL (list above the line)

Do you read, write and speak English FLUENTLY? Yes No Do you have any limitations in reading, writing, speaking or understanding English? Yes No If yes, please list them here. (NOTE that if no limitations are listed here, the candidate is understood to be confirming that he/she has NO limitations).

MAINTENANCE/QUALITY CONTROL POSITIONS:

Do you have an FAA A&P mechanic's license? Yes No Give the license number: _____

What other FAA licenses do you currently hold (give types and numbers): _____

On what TYPES of aircraft have you worked? _____

What advanced operations are you qualified to perform? _____

What special skills do you have have as a mechanic or technician? _____

What kinds of utility vehicles can you operate? _____

Have you ever been subject to disciplinary action by the FAA? Yes No If yes, explain: _____

Do you intend to acquire any FAA licenses or type ratings in the next 6 months? Yes No If yes, explain: _____

GSE mechanics ONLY: please list the types of equipment on which you have worked: _____

What specialized training have you had (such as safety training, ground support equipment training, weight and balance training, etc.)? _____

Do you have any other specialized skills which we should consider in assessing your ability to do this job? Is there any other information related to your work history or skills which you think would be helpful to us in considering your application? _____

FOR OFFICE STAFF ONLY:

What computer software do you use with fluency? _____

Do you type? Yes No If yes, typing speed: _____ wpm Do you have any accounting or bookkeeping skills? Yes No

How many phone lines have you handled? _____ What other office skills do you have? _____

TO BE CAREFULLY READ BY ALL APPLICANTS

Do you need this page translated in to some other language? Yes No Which? _____

DO NOT SIGN THIS PAGE **UNTIL AND UNLESS YOU UNDERSTAND** ALL THE MATERIAL CONTAINED HEREIN. If there is something which you do not understand, ASK the interviewer BEFORE signing these statements.

NOTICE TO APPLICANTS:

FLIGHTSTAR AIRCRAFT SERVICES, INC. (hereinafter referred to as "FAS") complies with the Americans with Disabilities Act of 1990. During the interview process, you may be asked questions concerning your ability to perform job-related essential tasks. If a conditional offer of employment is made to you, you may be required to undergo a medical examination and/or a drug screening. If required, all entering employees in the same job category will be subject to the same history/physical testing requirements and all such information will be confidential and kept in secure files. The applicant agrees to such conditions as a condition of employment, insofar as such conditions are lawful and required of all persons in equivalent positions.

APPLICANT'S STATEMENT:

I CERTIFY that the answers given herein are true and complete to the best of my knowledge. I authorize the investigation of all matters contained in this application and hereby give FAS my permission to contact school, previous employers, references, regulatory and police agencies and others, and I hereby release FAS and all entities to which it may direct such inquiries from any liability as a result of such contact. I understand that misrepresentations, omissions of material facts or incomplete information in areas requested in this application may remove me from further consideration for employment. In addition, I understand that, if employed, any misrepresentations or omissions of material facts called for in this application will be cause for dismissal at any time without any previous notice.

I understand that while FAS makes every effort to provide steady, continuous work, it may not offer employment contracts, and it cannot and will not guarantee the permanence or duration of any position or assignment. Job tenure can be affected by many factors, including business or economic conditions, changes in laws or employer policies, conformity to work rules, job performance, my availability for work, etc. I further understand that my employment relationship, if any, in the absence of a contract, if any, is strictly on an at-will basis. I understand that my employment with FAS, in the absence of a contract, is for no specific term and may be terminated by me or by FAS with or without notice or cause at any time. I further understand that no oral promise, FAS policy, custom, business practice or other procedure (including the Employee Handbook or policies and procedures manuals) notwithstanding constitutes an employment contract or modification of any existing contract or the at-will employment relationship between me and FAS. The contents of any handbooks or manuals (which I understand are confidential information and the property of FAS) are subject to modification by FAS, solely at its discretion, without notice. I also understand that no supervisor or other official of FAS (except its owners, in writing) has the authority to enter into any agreement with me or to make any agreement contrary to the foregoing. I understand that any dispute arising from my employment, if offered and accepted, is to be resolved within the jurisdiction of and under the laws of the State of Florida.

I further understand that all persons to whom a conditional offer of employment is made may be subject, at FAS' discretion, to a criminal background check, a driver's license check if the job being applied for involves driving a company vehicle, a verification with the FAA of any licenses noted within this application and such other employment reference checks as may be required by company policy and/or Federal or local statute.

DRUG-FREE WORK SITE AND DOT PROGRAM:

I understand that FAS is committed to a drug-free work environment for all its employees, in compliance with the Drug-Free Workplace Act of 1988 and that it is subject, under certain circumstances, to the DOT Drug program. I also understand that all persons to whom a conditional offer of employment is made may be required to pass a pre-employment drug screening. I further agree to take such random, periodic and post-accident drug screenings as may be required in the future, as a condition of employment, and to hold FAS harmless for the results.

THIS APPLICATION CONSISTS OF ONE FOLDER AND _____ SUPPLEMENTAL EMPLOYMENT PAGES.

I WAS ASKED IF I UNDERSTOOD AND AGREED TO EVERYTHING NOTED ON THIS PAGE.

Signature of applicant

Date

Applicant please PRINT your name here