

**NORTH AMERICAN AIRCRAFT SERVICES, INC.  
APPLICATION FOR EMPLOYMENT**

**Personal Information**

Rev. 1-29-99

Please print

Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Phone (Home): _____		(Work): _____
Social Security #: _____		Date of Birth: _____
<p>DOB optional (For use in criminal and drivers record history. The Age Discrimination In Employment Act of 1967 prohibits Discrimination in employment on the basis of age.</p>		
Drivers License #: _____		State of Issue: _____ Exp. Date: _____
Aviation License type and #: _____		
Are you legally eligible for work in the USA? _____		Are you over 18 years of age? _____
Have you ever been convicted or pleaded guilty to a misdemeanor or a felony? _____		
If yes, please explain: _____		
_____		

**Employment Desired**

Position: _____	Date you can start: _____	Salary Desired: _____
May we inquire of your present employer? _____		Do you have a relative currently employed with us? _____
Who? _____	Willing to relocate? _____	
Location you are applying for: _____		Additional Comments: _____
_____		

NAME OF SCHOOL	LOCATION	YEARS ATTENDED	YEAR GRADUATED	SUBJECTS STUDIED

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**General Information**

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Subjects of special study/research work or special training/skills	
U.S. Military or Naval Service (Please provide copy of DD 214)	Rank: _____

**Present/Former Employers**

This must be completed for mandatory background checks

Use the space below to list your employment history for the last ten years. Please give an explanation for any gap of two months or greater. You must list employment dates, company name, and city, state, and telephone numbers. If a contract company on a temporary basis employed you, list the Contract Company's name and address followed by the name of the company you were assigned to. If you were self-employed or unemployed, please list those dates. (Please attach an additional sheet of paper if necessary). Even if you have included a resume with this form, or if you have sent a resume to us in the past, you must complete this page. **PLEASE PRINT.**

Company Name & Address	Contact Person & Telephone Number	Job Title	Dates of Employment

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**References**

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List the name, address, and telephone number of 3 personal references not related to you who can verify your work history for the past 10 years.

NAME	ADDRESS	TELEPHONE NUMBER WITH AREA CODE

**Previous Cities of Residence and Names Used**

List all cities and states where you have lived for the past 10 years.

List all other names used in the past 10 years.

City and State	Names Used and Dates

**Authorization**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal and otherwise, and release the company from all liability from any damage that may result from utilization of such information. This authorization and consent for release of personal acknowledges that NAAS and/or its agents may conduct investigations. These investigations might also include, but are not limited to, educational institutions attended, financial or credit agencies, records of previous employment, including work history, records from the U.S. Veterans' Administration, criminal information on file in local, state or federal agencies, worker's compensation records, motor vehicle records and license verifications.

I understand that these searches will be used to determine employment eligibility under the company's employment policies. Therefore, I authorize and consent for full release of records (either orally or in writing) to the authorized representative of the claims, losses, liabilities, costs, expenses or any other charges or complaint filed with any agency arising from retrieving or reporting this information. I understand this notice will apply to any future updated reports that may be requested and is valid for up to 1 year from the below date for hiring purposes. I understand that according to the Federal Fair Credit Act, I am entitled to receive upon written request, a disclosure of the background report conducted on me from NAAS and/or James Van Ella and Associates.

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I hereby voluntarily consent to: searches of my personal belongings that I may bring to the Company's property, to include my workspace, searches of my desk, locker, and vehicle or other storage areas. I understand that the Company's property or other work places, in its effort to eliminate alcohol and drug use as well as any illegal activity, at the Company's property or other work places, are subject to search. I consent to the release of information about items found during such searches to appropriate Company officials.

I understand that this consent is voluntary but that my refusal to sign this consent may subject me to disciplinary action, including denial or termination of employment with this company.

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Interviewed By**

\_\_\_\_\_  
**Date**

**HIRED**       **NOT HIRED**

\_\_\_\_\_  
**Responsible Manager**

\_\_\_\_\_  
**Date**

**DO NOT WRITE BELOW THIS LINE**

**Remarks**

<b>Q.C. Manager Only</b>	<b>Drug Test Results:</b>	<b>Drug Test and Start Date:</b>
<b>Neatness</b>		<b>Character</b>
<b>Personality</b>		<b>Ability</b>

<b>Hired</b>	<b>For Dept.</b>	<b>Position</b>	<b>Will Report</b>	<b>Salary/Wages</b>