

# ASCENT AVIATION SERVICES CORP.

6901 S. Park Avenue  
Tucson, Arizona 85756

## APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

P E R S O N A L	Last Name	First	Middle	Date
	Street Address			Home Phone
	City, State, Zip			Business Phone
	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year Location			Social Security No.
	Position Desired			Pay Expected
	Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours/days can you work			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If you are under 18 years of age, can you provide required proof of your eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No			When will you be available to begin work?
	Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of citizenship or immigration status will be required upon employment)			
	Have you been convicted of a felony within the last 7 years? <input type="checkbox"/> Yes <input type="checkbox"/> No (Conviction will not be necessarily disqualify from employment)			
	Other special training or skills (languages, machine operation, etc.)			
How did you learn of our organization?				

E D U C A T I O N	SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Elementary				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	



<b>M I L I T A R Y</b>	<i>COMPLETE THIS SECTION IF YOU SERVED IN THE U.S. ARMED FORCES</i>	Branch of Service
	Describe your duties and any special training	Period of Active Duty (Month and Year) From _____ To _____
		Rank at Discharge
		Date of Final Discharge

WHAT SPECIAL TRAINING HAVE YOU RECEIVED? WHAT LICENSES, DIPLOMAS, SPECIAL QUALIFICATIONS, ETC., HAVE YOU EARNED?

Would you have tools necessary for your position?  Yes  No

If yes explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

<b>MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS</b> <i>(Exclude those which may disclose your race, color, religion or national origin)</i>

*Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or disability*

<b>S I G N A T U R E</b>	I hereby declare the information provided by me in this Application for Employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal. I authorize you to obtain an investigative consumer report containing information obtained through personal interviews with my neighbors, friends and acquaintances. This report, if obtained, may include information as to my character, general reputation, personal characteristics and mode of living. I understand I have the right to make a written request within a reasonable period to receive additional detailed information about the nature and scope of any such investigation.	
	_____ Date	_____ Signature

FOR EMPLOYER'S USE ONLY

R E F E R E N C E  C H E C K	EMPLOYER	PERSON CONTACTED	RESULTS
	1		
	2		
	3		
	4		
	5		

I N T E R V I E W  R E S U L T S	INTERVIEWER NAME AND COMMENTS