

APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT THE INFORMATION BEING REQUESTED IN THIS FORM. WRITE LEGIBLY. Date applied: Position Applying for: Full time Part time Are you interested in full time or part time employment? Yes 🗖 No 🗖 Were you referred by anybody who is or has been employed by Star Marianas Air, Inc.? If yes, provide name: Personal Information Family Name Given Name Middle Name Mailing Address Home number: (Date of Birth: Mobile Number: () Other contact number/specify: (Civil Status: Email address: Sex Citizenship: **Educational History** Name and Address of Institution (Post Graduate) Level or degree obtained Dates Attended (Mo/Yr) From То Name and Address of Institution (College) Level or degree obtained Dates Attended (Mo/Yr) Τo From Name and Address of Institution (Secondary) Level or degree obtained Dates Attended (Mo/Yr) From То Name and Address of Institution (Primary) Level or degree obtained Dates Attended (Mo/Yr) From To **Employment History** Name and Address of Employer (List most current first) Job Title Dates Employed (Mo/Yr) Briefly describe the duties you performed, skills used or learned, advancements or promotions while you worked at this company. Use additional Sheet if necessary. Reason for leaving the company Name and Address of Employer Job Title Dates Employed (Mo/Yr) Briefly describe the duties you performed, skills used or learned, advancements or promotions while you worked at this company. Use additional Sheet if necessary. Reason for leaving the company

Employment History - continuation		
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Briefly describe the duties you performed, skills used or additional Sheet if necessary.	learned, advancements or	promotions while you worked at this company. Use
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List special trainings you have completed or skills y	you possess that would b	o relevant to the job you are applying for Attach
additional sheet if necessary.	you possess that would b	e relevant to the job you are applying for. Attach
Have you ever been convicted of any crime? Yes \(\subseteq \) No \(\subseteq \) If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation:		
Applicant's declaration:		
By affixing my signature below I hereby declare that the foregoing information is true and complete to the best of my knowledge. I understand that a false statement may disqualify me from employment or cause my dismissal.		
Signature:		Date: