



APPLICATION FOR EMPLOYMENT

Date of Application _____

Position Applied for: _____

An Equal Employment Opportunity Employer

NOTICE TO APPLICANT:

- 1) The company does not discriminate in its employment practices on the basis of race, color, religion, sex, national origin, age, marital status, and disability or veteran status. Questions on this application relating to such characteristics will be used only for government reporting purposes.
- 2) Many positions within the company, including administrative and clerical positions, require some physical ability, including the ability to lift moderate weights. Please consider this. We will make reasonable accommodations in altering the requirements of the position when possible. However, because of the nature of our services and business necessity, we are limited in what we can do.
- 3) We appreciate your interest in our company and assure you we are interested in your qualifications. A clear understanding of your background and work history will aid us in determining if our current open position best meets your qualifications. It is to your advantage to give complete and detailed answers to the questions in this application.
- 4) Internal policy prohibits this organization from entering into employment contracts unless they are in writing and approved by the Company President. This application neither implies nor establishes a contract for employment. Completion of this application in no way obligates Ameristar Jet Charter, Inc. to provide employment.

Name	Last	First	Initial	Social Security Number
Address	Street		City	State Zip
Home Telephone	Business Telephone		Date Available for Work	
Type of Employment Desired				Wage Desired
<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal				
Referral Source				
<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Other:				

- If you are under 18, can you furnish a work permit? Yes No
- Have you ever applied at Ameristar Jet Charter, Inc. before? Yes Date _____ No
- Have you ever been employed by Ameristar Jet Charter, Inc. before? Yes Date _____ No
- Are you legally eligible for employment in the U.S.?
If employed, will you be prepared to produce proof in accordance with the Immigration Reform and Control Act of 1986, as amended? Yes No

List any friends/relatives who work for this organization:

- Have you ever been convicted of or pled guilty to a crime (whether a felony or a misdemeanor); and/or entered into a pre-trial diversion?
A positive response may not necessarily affect your eligibility to be hired. If 'Yes', when, where, and what was the disposition of the case? Yes No

- As related to the position applied for, have you ever served in any of the military services? Yes No
 If 'yes', what branch? _____

As related to the position applied for, what languages do you:

	Speak	Read	Write	Degree of fluency
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

EMPLOYMENT EXPERIENCE *List most recent employer first. Use Page 4 if additional space needed*

From	To	Company Name and Address	Telephone
Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving
From	To	Company Name and Address	Telephone
Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving
From	To	Company Name and Address	Telephone
Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving
From	To	Company Name and Address	Telephone
Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving

May we contact the above employers? Yes No If 'no,' indicate with * which one(s) you do not wish us to contact.

EDUCATIONAL HISTORY *List all schools attended, including trade, business, or technical institutions*

School Name and Location	Yrs Attended	Degree Received	Course of Study
High School			
Trade School			
College			

SPECIAL SKILLS & QUALIFICATIONS

List any other education, training, special skills, or certificates/licenses you possess:

List any other machines or equipment that you are qualified and experienced at operating:

Additional knowledge, skills, qualifications, publications, or awards that will be helpful to us in considering your application:

PROFESSIONAL REFERENCES Please give name, address, and daytime phone number of three professional references

NAME AND TITLE	ADDRESS	TELEPHONE

CERTIFICATION

Please read very carefully. If you have any questions regarding this statement, please discuss them with a Human Resources Representative before signing.

I certify that all the information submitted by me on this application is true and complete. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

Initials

I authorize Ameristar Jet Charter, Inc. to conduct a reference check so that a hiring decision may be made. In the event that Ameristar Jet Charter, Inc. is unable to verify any reference stated on this application, it is my responsibility to furnish the necessary documentation. I agree to cooperate in a thorough investigation of all statements made herein and other matters relating to my background and qualifications. I understand that any investigation conducted may include a request for employment and educational history, driving record, and criminal history. I authorize any person, school, current and former employer, and any other organization or agency to provide information relevant to such investigation and I hereby release all persons and corporations requesting or supplying information pursuant to such investigation from all liability or responsibility to me for doing so. I understand that I have the right to make a written request within a reasonable period of time for complete disclosure of the nature and scope of any investigation.

Initials

If accepted for employment with Ameristar Jet Charter, Inc. I agree to abide by all of its policies and procedures. If employed, I understand that I may terminate my employment at any time without notice or cause, and that the Employer may terminate or modify the employment relationship at any time without prior notice or cause. In consideration of my employment, I agree to conform to the rules and regulations of the Employer, as same may be changed from time to time, and I understand that no representative of the Employer, other than the President or Human Resources Officer, has any authority to enter into any agreement, oral or written, for employment of any specified period of time or to make any agreement or assurances contrary to this policy. If employed, I understand that my employment is for no definite period of time, and if terminated, the Employer is liable only for wages earned as of the date of termination.

Initials

FOR PILOTS ONLY: *I certify that all the information submitted by me on the supplemental application form is true and complete. I understand that employment may be contingent upon my meeting all placement considerations, including medical requirements, background checks and performing all essential job functions. I also understand that, if I am employed, I will be terminated if I provide false or fraudulent information on the supplemental application or on any document or oral representation provided to Ameristar Jet Charter, Inc. in support of my application for employment.*

Initials

I have read, understand, and by my signature consent to these statements.

Date

Applicant Signature

Ameristar Jet Charter, Inc.

Pre-Employment Notification & Acknowledgement

I understand and acknowledge that I will be required to undergo a DOT/FAA pre-employment drug test for the following prohibited drugs (as defined in 49 CFR § 40.3) prior to being hired or transferred into a Department of Transportation (DOT) safety-sensitive position as defined in 14 CFR part 120¹:

- Marijuana,
- Cocaine,
- Opioids,
- Phencyclidine (PCP), and
- Amphetamines.

(Print Name)

(Signature)

(Date)

In accordance with the Department of Transportation's (DOT's) Procedural regulation, 49 CFR part 40, § 40.25(j), in the **last 2 years** tested positive, or refused to test, on any pre-employment drug or alcohol test administered by a DOT employer to which you applied and did not obtain employment?

NO If NO, sign below.

YES If YES, did you successfully complete the DOT return-to-duty procedures described in 49 CFR part 40, Subpart O, with a qualified Substance Abuse Professional (SAP), as well as the return-to-duty and follow-up testing? Please indicate your response and explanation below:

YES; please explain:

NO; please explain:

(Print Name)

(Signature)

(Date)

¹ A safety-sensitive function, as described in 14 CFR part 120, §§ 120.105 and 120.215, includes a flight crewmember, flight attendant, flight instructor, aircraft dispatcher, aircraft maintenance or preventive maintenance, ground security coordinator, aviation screener, air traffic controller, and operations control specialist.

SUPPLEMENT TO APPLICATION FOR EMPLOYMENT

EMPLOYMENT EXPERIENCE, continued

From	To	Company Name and Address	Telephone
Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving
From	To	Company Name and Address	Telephone
Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving
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Position Held		Describe your work	
Supervisor's Name and Title		Last Salary	Reason for leaving
From	To	Company Name and Address	Telephone
Position Held		Describe your work	
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PILOT SUPPLEMENT TO APPLICATION FOR EMPLOYMENT

DATE	NAME	SOCIAL SECURITY NO.
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PILOT CERTIFICATE

FAA MEDICAL CERTIFICATE

Number _____

ATP Certificate? Yes No

Commercial License? Yes No

Multi-engine Rating? Yes No

Instrument Rating? Yes No

ATP Waiver or Limitation?* Yes No
**if 'yes', please explain on last page*

Type _____

Expires _____

Restrictions ★ Yes No

Statement of demonstrated ability★ Yes No
★ If 'yes', please explain on last page

AIRCRAFT TYPE RATINGS

Are you a military-trained pilot? Yes No Branch _____

Do you possess a FCC restricted radio operator's permit? Yes No

Are you able to travel to and from the U.S. without restrictions? Yes No

Do you have a valid driver's license? Yes No State ____ No. _____

Are you willing and able to work rotating shifts including nights and weekends? Yes No

Are you willing to transfer to another city? Yes No

Have you ever been involved in an aircraft incident or accident as defined by NTSB regulations or as defined by any applicable military regulation or publications? Yes No
If 'yes', please explain on last page.

Have you ever been subject to a military flying evaluation board, aircraft accident/mishap investigation or lost, been denied, or been limited in the exercise of any military flight ratings? Yes No
If 'yes', please explain on last page.

Have you ever been subject to any FAA enforcement action or investigation? Yes No
If 'yes', please explain on last page.

Have you ever failed any check ride for any reason? Yes No
If 'yes', please explain on last page.

Have you ever been convicted of violating any law (other than a traffic misdemeanor)? *Disclosure of a criminal record does not automatically disqualify you from consideration. Your case will be judged on its own merit. If 'yes', please explain on last page.* Yes No

FLIGHT TIME	PIC	SIC	INSTRUCTOR	SIMULATOR
Total Time _____	_____	_____	_____	_____
Single Engine _____	_____	_____	_____	_____
Multi-engine _____	_____	_____	_____	_____
Turboprop _____	_____	_____	_____	_____
Turbojet _____	_____	_____	_____	_____
Instrument _____	_____	_____	_____	_____
135/121/125 _____	_____	_____	_____	_____

Please explain 'yes' answers in the space provided below:

INSTRUCTIONS:

Please review your application before submission.

1) To submit your application via email, please select the 'Submit Form' button provided in the toolbar at the top of the page and follow the instructions. By selecting the 'Submit Form' button, you agree to the terms provided on page 3 of this application.

OR

2) You may print your application, initial and sign where appropriate on page 3, and fax to:

(972) 725-9047

OR

3) You may print your application, initial and sign where appropriate on page 3, and mail to:

Ameristar Jet Charter, Inc.
Attention: Human Resources
4400 Glenn Curtiss Drive, Ste #100
Addison, TX 75001