

Job Application Form

Swift Airlines

20150 Bruce B Downs Blvd, Tampa, FL 336471

(800)555-5555

Swift Airlines is an equal opportunity employer. This application will not limit or exclude any applicant from consideration for employment on a basis of past actions and varied work experiences. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative during company hours.

Please fill out all of the sections below:

1. Applicant Information

Applicant Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone Number: _____

Email Address: _____

Date of Application: _____

2. Employment Position

Position applying for: _____

How did you hear about this position? _____

What days are you available for work? _____

What hours or shift are you available for work? _____

If needed, are you available to work overtime? _____

On what date can you start working if you are hired? _____

Do you have reliable transport? _____

Salary desired: _____

3. Personal Information

Have you ever applied to or worked for Swift Airlines before? _____

If yes, when? _____

Are you 18 years of age or older? _____

Are you a U.S. citizen or approved to work in the United States? _____

Are you a registered voter? _____

Will you consent to a mandatory controlled substance test? _____

Do you have any condition which would require job accommodations? _____

If yes, please describe accommodations required below:

Have you ever been convicted of a criminal offense (felony or misdemeanor)? _____

If yes, please state the nature of the crime(s), when and where were you convicted and what was the disposition of the case:

(Note: No applicant will be denied employment solely on the grounds of a criminal offense. The date and nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position applied for may, however, be taken into consideration.)

4. Job Skills and Qualifications

Please list below the skills and qualifications you possess for the position:

(Note: Swift Airlines complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

What is the highest form of education you have received? _____

Military (if applicable):

Have you ever been a member of the Armed Services? _____

What branch of the military did you enlist? _____

What was your military rank when discharged? _____

How many years did you serve in the military? _____

What military skills do you possess that would be an asset for this position?

5. Previous Employment

Employer Name: _____

Job Title: _____

Supervisor Name: _____

Employer Address: _____

City: _____ State: _____ Zip code: _____

Employer Telephone Number: _____

Date Employed:

Employer Name: _____

Job Title: _____

Supervisor Name: _____

Employer Address: _____

City: _____ State: _____ Zip code: _____

Employer Telephone Number: _____

Date Employed: _____

Employer Name: _____

Job Title: _____

Supervisor Name: _____

Employer Address: _____

City: _____ State: _____ Zip code: _____

Employer Telephone Number: _____

Date Employed: _____

6. References

Please provide 3 personal and professional reference(s) below:

Reference 1: _____

Reference 2: _____

Reference 3: _____

7. Employment Agreement

This agreement states that you and Swift Airlines must give at least a three weeks' notice before termination of employment, Unless due to illegal activities in or out of the workplace from the time of your employment, at any time for any reason, with cause. No representative of Swift Airlines has authority to enter into any agreement contrary to the termination of your employment. With this agreement, you understand that your employment at Swift Airlines may be terminated at any time given a three weeks' notice with reason, and that you acknowledge that no oral or written statements or representations regarding your employment can change this employment status, except for a written statement signed by you and either our Executive Vice-President/Chief of Operations or the Company's President.

Applicant Signature: _____ Dated: _____