



An Equal Opportunity Employer

**EMPLOYMENT APPLICATION**

NAME	LAST	FIRST	MIDDLE	SOCIAL SECURITY NUMBER
ADDRESS - NUMBER AND STREET				CITY STATE ZIP
CURRENT ADDRESS (IF DIFFERENT)				CITY STATE ZIP
HOME TELEPHONE NUMBER		BUSINESS TELEPHONE		
( ) - - - - -		( ) - - - - - EXT. - - - - -		

**JOB INTEREST**

POSITION DESIRED	BEGINNING SALARY EXPECTATIONS
ARE YOU AVAILABLE FOR FULL TIME WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO PART TIME WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO SHIFT WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO	(EXPLAIN RESTRICTIONS)
ARE THERE ANY DAYS OF THE WEEK YOU WOULD NOT BE ABLE TO WORK? (PLEASE SPECIFY)	HOW SOON WOULD YOU BE AVAILABLE FOR EMPLOYMENT?
IF YOU HAVE EVER WORKED FOR AIRBUS OR AN AIRBUS AFFILIATE, STATE WHEN AND WHERE.	

**EDUCATION AND TRAINING**

TYPE	NAME OF SCHOOL	LOCATION (CITY, STATE)	NUMBER OF YEARS ATTENDED	GRADUATED (OR G.E.D. FOR HIGH SCHOOL)	MAJOR/ DEGREE
HIGH SCHOOL OR PREP SCHOOL					
COLLEGE(S) PROFESSIONAL SCHOOLS AND/OR OTHER TRAINING					

IF YOU ATTENDED, BUT DID NOT COMPLETE COLLEGE, GIVE REASONS

WHICH LANGUAGES OTHER THAN ENGLISH DO YOU SPEAK? READ OR WRITE?

**PERSONAL INFORMATION**

ARE YOU AT LEAST 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO	HOW DID YOU HEAR ABOUT THE COMPANY?
HAVE YOU BEEN CONVICTED OF A FELONY DURING THE PAST 10 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, STATE DETAILS AND DATES ON AN ADDITIONAL SHEET	
NOTE: CONVICTION OF A CRIME WILL NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT. HIRING DECISIONS WILL BE BASED UPON ALL RELEVANT CIRCUMSTANCES, INCLUDING THE NATURE OF THE CRIME AND THE JOB FOR WHICH YOU HAVE APPLIED.	
IF YOU ARE APPLYING FOR A POSITION THAT REQUIRES YOU TO DRIVE, DO YOU HAVE A VALID DRIVER'S LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "YES" - STATE _____ LICENSE NO. _____	CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO
WILL YOU RECEIVE A SATISFACTORY REFERENCE FROM YOUR CURRENT AND ALL PREVIOUS EMPLOYERS? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF "NO", EXPLAIN
HAVE YOU BEEN DISCHARGED OR ASKED TO RESIGN BY AN EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF "YES", EXPLAIN
SKILLS/QUALIFICATIONS YOU POSSESS THAT MAY BE RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING.	

**1.**

EMPLOYER	DATES OF EMPLOYMENT FROM	TO
ADDRESS	PHONE	
STARTING POSITION	STARTING SALARY	
LAST POSITION	FINAL SALARY	
REASON FOR LEAVING	IMMEDIATE SUPERVISOR	
DUTIES OF LAST POSITION		

**2.**

EMPLOYER	DATES OF EMPLOYMENT FROM	TO
ADDRESS	PHONE	
STARTING POSITION	STARTING SALARY	
LAST POSITION	FINAL SALARY	
REASON FOR LEAVING	IMMEDIATE SUPERVISOR	
DUTIES OF LAST POSITION		

**3.**

EMPLOYER	DATES OF EMPLOYMENT FROM	TO
ADDRESS	PHONE	
STARTING POSITION	STARTING SALARY	
LAST POSITION	FINAL SALARY	
REASON FOR LEAVING	IMMEDIATE SUPERVISOR	
DUTIES OF LAST POSITION		

**4.**

EMPLOYER	DATES OF EMPLOYMENT FROM	TO
ADDRESS	PHONE	
STARTING POSITION	STARTING SALARY	
LAST POSITION	FINAL SALARY	
REASON FOR LEAVING	IMMEDIATE SUPERVISOR	
DUTIES OF LAST POSITION		

ACCOUNT FOR ALL THE TIME DURING THE LAST TEN YEARS YOU WERE NOT EMPLOYED OR IN SCHOOL

### CERTIFICATION AND UNDERSTANDING

In making this application for employment with the North American Companies of Airbus, I affirm that all information is true and complete and I grant permission for the Company to contact all references, schools and former employers, and make inquiries regarding my character, personal attributes and general reputation. I understand that any omission or misrepresentation in this application will be sufficient cause for rejection of this application or my dismissal after employment. I also understand that if I am employed, I must complete section 1 of Form 1-9 and present documentation establishing my identity and employment eligibility. NEITHER THIS EMPLOYMENT APPLICATION NOR ANY OF THE WRITTEN OR ORAL POLICIES AND PROCEDURES OF THE NORTH AMERICAN COMPANIES OF AIRBUS (including, without limitation, those set forth in the company's written policies and procedures) NOR ANY COMMUNICATION OR REPRESENTATION BY COMPANY PERSONNEL SHALL CREATE ANY CONTRACT OR TERM OF EMPLOYMENT BETWEEN THE APPLICANT AND THE COMPANY. ALL EMPLOYMENT WITH THE COMPANY IS EMPLOYMENT AT WILL WHICH CAN BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE. I authorize my former employer(s), and school(s) attended, as indicated above, to disclose any information regarding my employment and release them and their company of all liability for any damage for issuing same. I also agree to indemnify and hold the North American Companies of Airbus harmless from the results of any such inquiry.

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_