

Office: 650-354-1399 Fax: 650-354-1395

Email: careers@victor-aviation.com

Victor Aviation is an Equal Opportunity Employer and is committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Application For Employment

Personal Infor	matic	on					
First			Middle	Last			
				T	Т		
Address			City	State	Zip		
Phone Number	Mobile Number		Email Address				
			Can you within 2 do	ve after ampleyment begins			
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test?			Are you at least 18 years old?	Can you, within 3 days after employment begins, submit verification of your legal right to work in			
Yes □ No □			Yes □ No □	the United States? Yes □ No □			
Position							
Position You Are Applying For			Days / Hours Available		Available Start Date		
Employment Desired:	☐ Full	Time	rt Time	Other:			
Education (or attach current resume)							
School Name Location		Years Attended	Degree Received				
References							
Name		Relationship	Title	Company	Phone / E-mail		
How did you hear about our company?							
Reviewed By:							
					: (Rev 9/18)		

Please provide 5 years of job history						
Employer (1)	Job Title		Dates Employed			
Address	City	State	Zip			
We may contact this employer to confirm information: Yes \square No \square	Contact Name:	Contact E-Mail or I	Phone:			
Employer (2)	Job Title		Dates Employed			
Address	City	State	Zip			
We may contact this employer to confirm information: Yes \square No \square			Phone:			
Employer (3)	Job Title		Dates Employed			
Address	City	State	Zip			
We may contact this employer to confirm information: Yes \square No \square	Contact Name:	Contact E-Mail or F	Phone:			
Mechanic Experience						
Signature Disclaimer						

Employment History

- I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.
- I understand that, if employed, I will be required to furnish verification of my legal right to work in the United States by providing acceptable documentation as required by statute within 72 hours of commencement of employment.
- I authorize Victor Aviation to contact my references as it may deem necessary to obtain satisfactory information. I also authorize those contacted to release this information.

Name (Please Print)	Signature
Date	