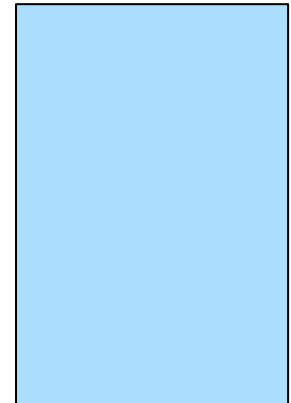




## CCM APPLICATION FORM



You must:

1. Complete all of the information required in sections 1.1 to 1.6 of this form
2. Read, sign and date the declaration in section 1.3 and 1.6
3. Attach one passport sized photograph in the box above

### 1.1 INTRODUCTION

1. Full name	
2. Adress, post code and place	
3. Date of Birth	
4. Nationality / passport no.	
5. Social Sec. No. (AVS-AHV) (if applicable)	
6. Working permit and Exp. Date (if applicable)	
7. Contact telephone number (Include international country code)	
8. Home country contact telephone number if different (Include international country code)	
9. Email address	
10. Marital Status	
11. Children (name and age)	
12. Height (meters) and Weight (Kg)	



<p>13. Do you have any tattoos? If yes, complete section 1.3</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p>14. Have you attended a Cabin Crew Assessment Day for avantiar before? If yes, state where and when</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p>15. Have you been employed with avantiar before? Please provide details?</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p>16. Have you ever been dismissed or asked to resign by an employer? If yes, provide details</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p>17. Have you ever been convicted of a criminal offence? If yes, provide details</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>
<p>18. If you are offered a position with avantiar, how soon would you be able to start?</p>	
<p>19. Do you have previous Cabin Crew experience?</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>



## 1.2 PREVIOUS RESIDENCE (last 10 years)

From M/Y	To M/Y	Address, Place, Country
	present	

### 1.2.1 EDUCATION (incl. Languages course)

Year/s	Level	Type of Diploma / name of the school, country

### 1.2.2 EMPLOYMENT RECORDS

Cabin Crew Member must specify the aircraft type rating

From M/Y	To M/Y	Employer and address	Position/ reason for leaving (Aircraft type if CCM)
	present		

## 1.3 TATTOOS

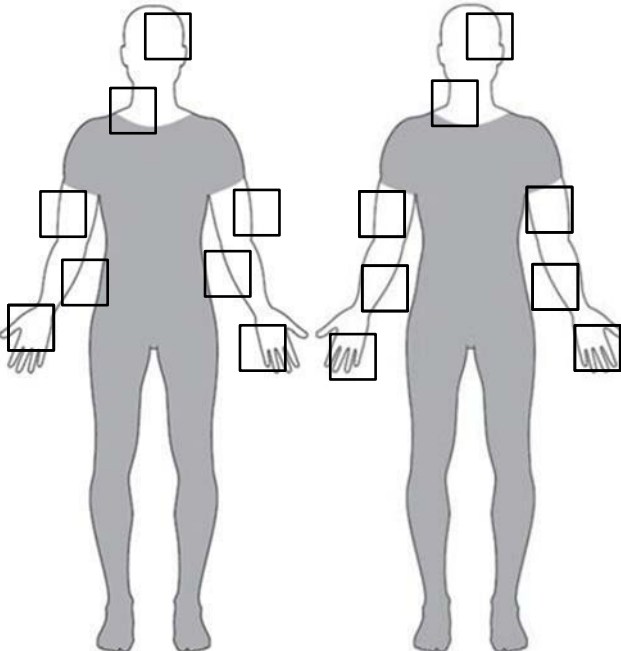
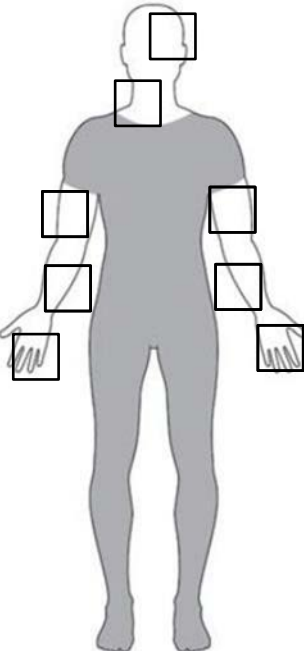
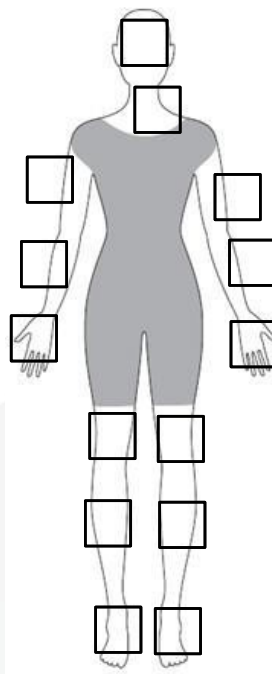
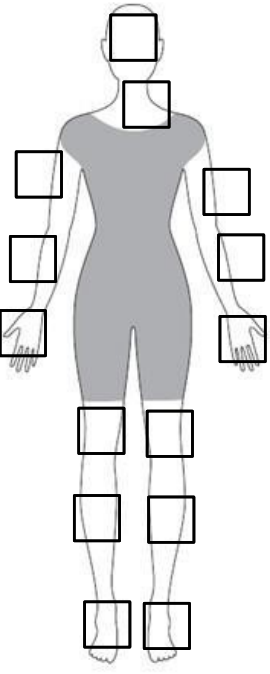
If you have answered YES to number 13 in section 1.1 you must complete this section. If you have answered NO to number 13 in section 1.1 leave this section blank.

### 1.3.1 INSTRUCTIONS AND INFORMATION

Indicate on the appropriate diagram below the location of any tattoos you currently have. Tattoos that are outside of the grey areas on the diagram, for whatever reason, are unacceptable to avantiair.

**NOTE:**

1. Bandages and/or cosmetic coverings of tattoos outside of the grey areas are not permitted and/or acceptable to avantiair
2. If you are offered a position with avantiair and you have a new tattoo you must advise us immediately

<b>MALE</b>		<b>FEMALE</b>	
Front	back	Front	back
			

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## 1.3 LANGUAGE ABILITY

All communication in avantiair operated by avantiair for Cabin Crew is in English. You must be “fluent” in English and your English skills will be tested throughout the Assessment Day.

Please rate your English language ability and state which other languages are either your mother tongue or in which you are fluent.

LANGUAGE	ABILITY
English	

**NOTE:**

The avantiair definition of “**fluent**” means that you are able to:

1. Converse freely and respond to complex questions without hesitation
2. Read announcements clearly and to understand written material without difficulty

Should you be offered a position with avantiair, your language skills may be assessed in the languages you declared. You may be expected to use these abilities as part of your duties.

**Office use only**

<b>Language</b>		Assessor	
Reading			
Speaking			
Comprehension			
Writing			
Comments			
Result: Qualified / Not qualified*			
<b>Language</b>		Assessor	
Reading			
Speaking			
Comprehension			
Writing			
Comments			
Result: Qualified / Not qualified*			
<b>Language</b>		Assessor	
Reading			
Speaking			
Comprehension			
Writing			
Comments			
Result: Qualified / Not qualified*			
<b>Language</b>		Assessor	
Reading			
Speaking			
Comprehension			
Writing			
Comments			
Result: Qualified / Not qualified*			

\* Delete as appropriate



## 1.4 REFERENCE CONTACTS

You must provide details of at least **two** referees who are prepared to provide avantiair with a reference on your performance as follows:

1. Your current or most previous employer
2. A previous employer or a College/University

**The referee must be your direct Manager or a contact person in the Human Resources department.**

You must include the person's name, telephone number and work e-mail address. E-mail from web based e-mails, e.g. Yahoo or Gmail are not acceptable.

If you were studying, traveling or unemployed indicate the dates and duration. Do not leave gaps of more than 14 days.

**NOTE:**

1. avantiair will only contact the referees that you have provided on this form an **ONLY** with your approval
2. If you do not wish your current or previous employer to be contacted by avantiair, please tick the **NO** in the section below

Name and address of your <b>CURRENT or MOST RECENT</b> employer:	
Dates of employment:	From: _____ To: _____
Your position within that Company:	
Name and position of the referee ( <b>direct Manger or person in the HR</b> ):	
Referee contact details: (Professional work e-mail address and telephone number including international country code)	<u>Please use capital letters only</u>
Are we allowed to contact your current employer for a reference check:	YES <input type="checkbox"/> NO <input type="checkbox"/>

Name and address of previous employer or College/University:	
Dates of employment:	From: _____ To: _____
Your position within that Company:	
Name and position of the referee:	
Referee contact details: (Professional e-mail address and telephone number including international country code)	<u>Please use capital letters only</u>



## 1.5 DOCUMENT SUMMARY CHECKLIST

In order to make the registration and the documentation process efficient, please use this checklist to ensure that you have all the required documents with you and keep the forms and paperwork in the following order.

DOCUMENTS	PROVIDED		REMARKS
	YES	NO	
1. Completed Application Form	<input type="checkbox"/>	<input type="checkbox"/>	
2. Motivation Letter	<input type="checkbox"/>	<input type="checkbox"/>	
3. Current up-to-date CV/resume	<input type="checkbox"/>	<input type="checkbox"/>	
4. One Passport copy	<input type="checkbox"/>	<input type="checkbox"/>	
5. One copy of your highest Educational Certificate	<input type="checkbox"/>	<input type="checkbox"/>	
6. Copy of the Criminal Records Certificate*	<input type="checkbox"/>	<input type="checkbox"/>	
7. Two current or previous employer service letters	<input type="checkbox"/>	<input type="checkbox"/>	
8. One copy of the working permit (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
9. One copy of EASA Medical Report	<input type="checkbox"/>	<input type="checkbox"/>	
10. One full body photograph	<input type="checkbox"/>	<input type="checkbox"/>	
11. One colour passport size photographs (WHITE BACKGROUND not older than 6 month) / digital	<input type="checkbox"/>	<input type="checkbox"/>	
12. Competence card / Fire fighting training certificate	<input type="checkbox"/>	<input type="checkbox"/>	
13. EASA Cabin Crew Attestation	<input type="checkbox"/>	<input type="checkbox"/>	

\*to be provided in case of signature of contract



## 1.6 DOCUMENT SUMMARY CHECKLIST

In order to make the registration process efficient, please give us the following information regarding your experience and training.

Aircraft flown	
Last flight	
Medical certification and validity	
Emergency and Safety Equipment Training (R+S – 12) validity and date	
Dangerous Goods (DG – 24)	
CRM qualification and validity	
Security Training (SEC – 12)	
Fire fighting certificate and validity	

Legend:

T. Rating	Type Rating
DG (24)	Dangerous Goods within 24 months
SEC (12)	Security Training within 12 months
R+S (12)	Emergency and Safety Equipment Training within 12 months
CRM rec. (12)	CRM recurrent within 12 months





## 1.6. CONDITION OF EMPLOYMENT

For all our staff involved in security controls or having unescorted access to security restricted area of an airport, and according to German Legislation (NASP), we are obliged to perform a pre-employment and background check in order to ensure Aviation Security requirements. The pre-employment and the background checks are therefore an inherent part of employment. Your data will be treated confidential at all times.

### 1.6.1 DECLARATION

#### IMPORTANT, PLEASE READ AND SIGN

I hereby certify that all answers and information provided in sections 1.1 to 1.5 of this form are true and complete to the best of my knowledge. I authorize avantiair to investigate all statements mentioned above as may be necessary in arriving to an employment decision.

In the event of employment, I understand that false or misleading information provided on this form, during any interview, and/or on any supplemental forms may result in my dismissal from employment.

I understand that I am required to abide by all rules and regulations of avantiair.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_