# **TAKE FLIGHT**

# **Application for Employment**

Complete the entire application. Also include your resume. All information is considered confidential.

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

All Applications are to be sent to **Ryan Chasse**. E-mail: [ryan@takeflightadv.com](mailto:ryan@takeflightadv.com) or Mail: 506 Route 1, Kittery, ME 03904 **Applications are due on or before May 9th, 2025.**

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employment Positions:**

Position(s) applying for (Check all that apply):

Buddy ❑ Admissions Crew ❑ Flight Crew ❑ Intern ❑ Management ❑

\*You must be 16 or older to work as Admissions Crew and 18 or older to work as Flight Crew or Intern

Are you interested in becoming a Team Building Facilitator for Take Flight (for 16+)? ❑ Yes ❑ No

**Applicant Information**

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.) ❑ Yes ❑ No

Are you 18 years of age or older? ❑ Yes ❑ No

NO, what is your current age? \_\_\_\_\_\_\_\_

If hired, what date can you start working? \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

What days/hours are you interested in working?

Sun\_\_\_\_\_\_\_\_\_ Mon\_\_\_\_\_\_\_\_\_ Tues\_\_\_\_\_\_\_\_\_ Wed\_\_\_\_\_\_\_\_\_ Thu\_\_\_\_\_\_\_\_ Fri\_\_\_\_\_\_\_\_ Sat\_\_\_\_\_\_\_\_\_

Can you work weekends? ❑ Yes ❑ No

Are you currently employed? ❑ Yes ❑ No

If YES, who is your current employer and job title? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you available to work Weekends in April and May? ❑ Yes ❑ No September and October? ❑ Yes ❑ No

Do you have any of the following certifications (Required for Flight Crew)?

First Aid certification: ❑ Yes ❑ No CPR certification: ❑ Yes ❑ No

Other Certifications: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In addition to your work history, are there other skills, qualifications, or experiences that we should consider?**

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**Please include a copy of your resume with this document.**

**References**

Please list up to three persons who have knowledge of your work performance within the last four years. Please include at least one professional references. Additional references can be listed on another page.

Name- First, Last: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name- First, Last: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number: (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone Number: (\_\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Year Acquainted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Year Acquainted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please read carefully, initial and sign that you understand and accept this information**

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

Initial\_\_\_\_\_\_\_\_\_\_\_\_

If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment.

Initial\_\_\_\_\_\_\_\_\_\_\_\_

I understand that employment at this company is “at will,” which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Initial\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_