



- Attention:
1. This application form should be clearly filled in black or blue inked pen.
 2. Submit copies of your educational certificates.
 3. Attach a passport size photo and a copy of your identity card.
 4. Submit a letter of no objection from your present employer, if you are presently employed.
 5. Applications with inaccurate information, which do not meet requirements and which are incomplete will be disqualified.

YOUR PERSONAL INFORMATION

Applied Position: _____

Job ref. no.: _____ Advertisement ref. no. and date: _____

Applicant's name: _____ I. D. Card No.: _____

Date of birth: D M Y Age: _____ Blood group: _____

Sex: M F Height: cm Weight: kg Marital Status: S M D

Please attach
passport size photo

Email Address: _____ Contact no. _____

Permanent Address	Present Address
House Name: _____	House Name: _____
Street: _____	Street: _____
Ward: _____	Ward: _____
Atoll/Island: _____	Atoll/Island: _____
Contact no.: _____	Contact no.: _____

Parent/Guardian:

Name: _____	Contact no.: _____
Address: _____	Relationship: _____

EDUCATIONAL BACKGROUND

Schools/Institutions attended:

Name of School/Institution	Year entered	Year left	Last grade

Secondary and Higher Secondary Examinations: Please list SSC, GCE (OL), HSC, GCE (AL), etc results.

Exam Name	Subject	Grade	Year	Exam Name	Subject	Grade	Year

Other Training and Qualifications: Please list any other qualifications which are not listed above.

Institution/Examining Body	Details of Training or Qualification	Duration of Training

EMPLOYMENT RECORDS

Previous employment records: Please give details of any employment since leaving school.

Start Date	End Date	Position and Employer's Name	Main duties and Responsibilities

Reason(s) for leaving the previous job(s):

REFEREES

Give name and phone number of two referees (one academic) who can give information about you.

Name: <input style="width: 90%;" type="text"/>	Relation: <input style="width: 90%;" type="text"/>	Contact no.: <input style="width: 90%;" type="text"/>
Name: <input style="width: 90%;" type="text"/>	Relation: <input style="width: 90%;" type="text"/>	Contact no.: <input style="width: 90%;" type="text"/>

OTHERS

Were you employed in aviation industry in the past: Yes No

If yes, give details: _____

Have you applied for any other job(s) from this company: Yes No

If yes, give details: _____

Have you applied for any other job(s) from any other employer: Yes No

If yes, give details: _____

Have you applied for a course/scholarship: Yes No

If yes, give details: _____

Do you intend to go abroad for studies: Yes No

If yes, give details: _____

Your Ambition/Interested field: _____

Extra Activities/Hobbies: _____

Describe Island Aviation Services Ltd. as you know it: _____

Reason(s) for your interest in this company: _____

Do you have any relative(s), friend(s) working in this company: Yes No

If yes, give details:

Do you have relative(s), friend(s) working at the following organizations:

Organization	Yes	No	If yes, give details
1. Maldives Airports Company Ltd.	<input type="checkbox"/>	<input type="checkbox"/>	
2. Maldives Customs Service	<input type="checkbox"/>	<input type="checkbox"/>	
3. Department of Immigration & Emigration	<input type="checkbox"/>	<input type="checkbox"/>	
4. Port Health	<input type="checkbox"/>	<input type="checkbox"/>	
5. Civil Aviation Department	<input type="checkbox"/>	<input type="checkbox"/>	

Do you have Asthma, Migraine problems or any other medical problem? Yes No

If yes, please provide full details: _____

Do you have any records with the Police:

If yes, please provide full details: _____

APPLICANT'S DECLARATION

1. I declare that all the information given in this application form are accurate and complete.
2. I am aware that if, after employment, any information given is found to be inaccurate, then my employment can be terminated.
3. I understand that the company may seek information about me from my school or other sources.
4. If employed I agree to obey the rules and regulations of the company.

Applicant's signature:

Date:

The information given by the applicant in this application form will be held "strictly confidential" and would not be disclosed to any other party.

FOR USE OF HUMAN RESOURCE DEPARTMENT ONLY

Received by: Time:

Signature: Date:

Checked by: Remarks:

Signature: Date:

Please submit the completed application form, with supporting documents to the following address:

Head of Human Resources
Island Aviation Services Ltd.
M. Raaverige, Majeedhee Magu, Male' 20345
Phone: 3331265, Fax: 3314806, Email: hr@iasl.aero

Applicants selected for interview will be contacted through their contact numbers provided on this application. Disqualified/Unsuccessful applicants will be informed through the email address provided on this application.