

## Application for Employment

MOCHA HAGoTDI and thanks for applying to become a member of our creative and energetic team. So that we may begin the process in reviewing your request, we need you to answer each question below fully and accurately. You may attach additional sheets of paper if you need more space to respond. And, if you don't know what MOCHA HAGoTDI means, checkout [www.flycapeair.com](http://www.flycapeair.com).



### THE BASICS

Position applied for \_\_\_\_\_ Today's date \_\_\_\_\_

\_\_\_\_\_  
 Last name                      First name                      Middle name                      E-mail address

\_\_\_\_\_  
 Street address                      City                      State                      Zip code

\_\_\_\_\_  
 Day telephone number                      Evening telephone number                      Cell phone number

Are you seeking:      Full-time Year round                       Part-time Year round   
                                     Seasonal Full-time                       Seasonal Part-time

Date available: \_\_\_\_\_ Hours available: \_\_\_\_\_

Are you willing to work in:    New England                       Caribbean                       Florida

As the airline operates every day, it may be necessary for employees to work nights, weekends, and/or holidays. Are you available to work these time periods? \_\_\_\_\_

As the airline conducts training and meetings in many locations, it may be necessary for employees to travel (usually via company airplane or that of a partner airline). Are you able to travel for these purposes? \_\_\_\_\_

Salary/wage request: \_\_\_\_\_

If under 18 years of age, do you have a work permit?.....Yes  No

If hired, can you furnish proof you are eligible to work in the U.S.?.....Yes  No

Are you prohibited or limited in your performance of any job duties by any restrictive covenants not to compete, confidentiality agreements, or any other contractual obligations? If yes, please provide a copy of the agreement with this application.....Yes  No

It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors. We do not discriminate on the basis of race, color, religious creed, national origin, ancestry, sex, age, disability, sexual orientation, service in the armed forces of the United States, genetic information, gender identity or expression, marital status, pregnancy or on any other consideration made unlawful by federal, state, international or local laws.

**LET'S GET ACQUAINTED**

What attracted you to apply for work at Cape Air? \_\_\_\_\_  
 \_\_\_\_\_

How did you find out about the position? \_\_\_\_\_

Have you ever applied here before? Yes  No  If yes, when? \_\_\_\_\_

Were you ever employed here? Yes  No  If yes, when? \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

List three qualities/characteristics you possess that make you a good fit to work as part of the Cape Air team? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\*\*Please describe a time you provided a customer with exceptional customer service OR you received exceptional customer service from someone else. What did you or the employee do? How did it feel? (200 words or less; please attach on a separate piece of paper, if necessary). \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**YOUR EDUCATION, SKILLS & TRAINING**

	Name and Address of Schools Attended	Month/Year Attended From / To		Diploma, Degree, Certificate (if you did not graduate, please indicate here)	Subjects Studied
High School or GED					
License, Vocational, or Technical					
College or University					
College or University					
Graduate School					

What skills or additional training do you have that are related to the essential functions of the position for which you are applying? \_\_\_\_\_  
 \_\_\_\_\_

What machines or equipment can you operate that are related to the essential functions of the position for which you are applying? \_\_\_\_\_  
 \_\_\_\_\_

## YOUR EMPLOYMENT HISTORY

List names of your last four employers in consecutive order with present or last employer listed first. Account for all periods of time including any periods of unemployment. If self-employed, give firm name and supply business reference. You may include as a part of your employment history any verified work performed on a volunteer basis.

Dates Employed From/To	Name/Address of Employer	Supervisor	Position	Salary Start/End	Reason Left

Are you presently employed? Yes  No  If yes, can we contact your employer? Yes  No

Have you ever been fired from a job or asked to resign? Yes  No  If yes, please explain:

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Please provide three references, excluding relatives and former employers.

Name & Occupation	Address	Phone
1.		
2.		
3.		

**OTHER BACKGROUND INFORMATION**

Have you been convicted of a felony in the last ten (10) years?

Yes  No record

(An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to any inquiry herein relative to prior arrests, criminal court appearances or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.)

A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe your criminal conviction(s), listing the nature of your offense, and your rehabilitation since the conviction(s).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Regulations governing our Company require that certain groups of employees may be subject to background checks, fingerprinting, drug/alcohol testing and other such requirements.

PLEASE READ CAREFULLY BEFORE SIGNING

I have read and fully understand the questions asked in this application. I understand that this application is not an offer or contract of employment. I give Cape Air/Nantucket Airlines permission to contact all or any of my previous employers and references and release and hold harmless all persons and entities from liability for doing so. After an offer of employment has been made, I agree to submit to any background check and/or drug/alcohol test as required by the Company's governing authorities and authorize the testing facilities to disclose findings to Cape Air/Nantucket Airlines. I understand that any offer of employment is conditioned upon eligibility as determined by background checks, drug/alcohol tests, satisfactory references, and any other factor as determined by governing authorities.

I have provided truthful and complete responses to all inquiries in the application, including any supplemental information attached, and understand that the discovery of any falsification or omission may result in my immediate dismissal. If employed by Cape Air, I will embrace the Company's mission statement, abide by rules and regulations of the Company, as outlined in the employee handbook, as well as governing authorities, and I understand that all rules and regulations are subject to change without notice.

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

Notice

Employees in the U.S. are subject to State or Territory workers compensation laws.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Send Completed Application to:

Cape Air/Nantucket Airlines  
Attention: Human Resources  
660 Barnstable Road  
Hyannis, MA 02601