



HUMAN RESOURCES
APPLICATION FORM FOR JUNIOR FIRST
OFFICER

A **PERSONAL DETAILS**

1. NAME (as per passport) :	
2. DATE OF BIRTH :	
3. ADDRESS :	
4. TELEPHONE/MOBILE NO:	
5. EMAIL ADDRESS :	
6. CITIZENSHIP :	
7. NATIONAL I.D. NO:	

B **EDUCATIONAL QUALIFICATIONS**

G.C.E. O/L EXAMINATION		
SUBJECT	GRADE	YEAR
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

**Certified by Commissioner of Examination Department /OR
certificate attached**

.....
Signature

.....
Date

G.C.E. A/L EXAMINATION		
SUBJECT	GRADE	YEAR
1.		
2.		
3.		
4.		

**Certified by Commissioner of Examination Department/OR
certificate attached:**

.....
Signature

.....
Date

DEGREE FROM A RECOGNISED UNIVERSITY		
DEGREE	INSTITUTION	YEAR

C PROFESSIONAL DETAILS

HAVE YOU APPLIED FOR THE POST OF JFO BEFORE?	YES	NO

YEAR APPLIED	PRELIMINARY INTERVIEW	SIM ASSESSMENT	ADAPT ASSESSMENT	FINAL INTERVIEW

LICENCE PARTICULARS				
LICENCE-CURRENT & LAPSED	COUNTRY OF ISSUE	NO.	DATE OF ISSUE	DATE OF EXPIRY

D	LIMITATIONS OR ENDORSEMENTS ON LICENCE

E	INSTRUMENT RATING		
			DATE-A/C TYPE OF LAST I/R CHECK

F						
FLYING EXPERIENCE						
TYPE OF AIRCRAFT	ALL UP WEIGHT	COMMANDER		CO-PILOT		
	(kg)	P1 HRS	DATE OF LAST FLIGHT	P1 (U/S) HOURS	P2 HOURS	DATE OF LAST FLIGHT
Total Number of Flying Hours to Date :						

G AVIATION BACK GROUND			
AIRLINE	ORGANISATION	PERIOD OF EMPLOYMENT	AIRCRAFT TYPE

HAVE YOU BEEN INVOLVED IN ANY ACCIDENT OR INCIDENT?

HAVE YOU BEEN INVOLVED IN ANY INQUIRY OR INVESTIGATION?

DO YOU HAVE A WAIVER ON YOUR PILOT MEDICAL CERTIFICATE?

HAS THE RENEWAL OF YOUR LICENCE EVER BEEN DEFERRED ON MEDICAL GROUND?

.....
NAME

.....
SIGNATURE

.....
DATE