

# HELICOPTER PILOT APPLICATION FORM

#### General Information and instructions to candidates:

- 1. Answer each item completely and accurately. Incomplete answers on this application may disqualify you or may cause delays. False answers may lead to rejection or dismissal.
- 2. This form may be typed or handwritten in CAPITAL LETTERS only. Please attach additional sheets if required. CVs are required along with this form but are not a substitute for completing the form.
- 3. Application should accompany curriculum vitae and motivation letter, telling us why you want to join Mauritius Helicopter Limited.
- 4. Do not leave any item blank. If it is not applicable to you, please indicate "NA".

POST APPLIED FOR	₹ :				
JOB REFERENCE	:				
PERSONAL DETA	ILS				
SURNAME (in full)	:				
OTHER NAMES (in f	ull):				_
ADDRESS FOR COP	RESPONDEN	NCE:			
CURRENT ADDRES	S:				
PHONE Nos: Hom (Include full code)	e		Office	Mobile	
EMAIL ADDRESS:					
SEX :	Male	Fe	male		
MARITAL STATUS:	Married	Sir	ngle	Other (please specify)	
DATE OF BIRTH (dd	-mm-yyyy): _		NAT	TONALITY:	
NATIONAL IDENTIT	Y NO (Mauritia	n Nationals)	:		
LANGUAGES (Writte	en):				
LANGUAGES (Spoke	ən):				

### **<u>TERTIARY/PROFESSIONAL QUALIFICATIONS</u>** (please use additional sheet(s) if necessary)

NAME OF QUALIFICATION	RESULT	NAME OF INSTITUTION & ADDRESS	YEAR

LICENCES HELD	COUNTRY/ STATE	DATE (dd-mm-yyyy)	VALID UNTIL (dd-mm-yyyy)	RESTRICTIONS
ATPL (H) / CPL (H)				
INSTRUMENT RATING				
MEDICAL CERTIFICATE (Class)				

# English Language Proficiency Level:.....

HELICOPTER FLOWN	SINGLE ENGINE	TWIN ENGINE	PERIOD	TOTAL HRS	PIC HRS

## **<u>RELATED EMPLOYMENT HISTORY/EXPERIENCE</u>** (please use additional sheet(s) if necessary)

FROM (dd-mm-yyyy)	TO (dd-mm-yyyy)	NAME OF COMPANY	HELICOPTER	REASON FOR LEAVING

TOTAL Piston Engine Hours	
TOTAL Turbine Engine Hours	
TOTAL HOURS	

DO YOU HAVE A CURRENT JAA CLASS 1 MEDICAL (Yes/No):	
COUNTRY OF ISSUE and DATE OF ISSUE	

TOTAL FLYING HOURS IN LAST 12 MONTHS	HELICOPTER

TOTAL FLYING HOURS ON HELICOPTERS	
TOTAL FLYING HOURS AS <b>PILOT IN</b> <b>COMMAND</b> ON BELL JET RANGER B206	
DATE OF LAST FLIGHT ON BELL JET RANGER B206	

#### **ADDITIONAL INFORMATION:**

(1) Have you ever been involved in any previous accident / incident? If yes, please give details:

(2) Please give a summary of your personal strength and weaknesses (please use additional sheet(s) if necessary).

(3) If selected, when would you be available to start employment?

To the best of my knowledge, the facts set forth in my application for employment are true and complete. I understand that if considered for employment, any false statement may result in my failure to receive an offer or if I am hired, my termination of employment.

Date:

Signature of applicant: \_\_\_\_\_

Thank you for completing this form.

Please return your completed application form to:

Mauritius Helicopter Limited Human Resources Department 16<sup>th</sup> Floor, Air Mauritius Centre President John Kennedy Street Port Louis Mauritius

or by e-mail to : pilotrecruitment@mauritiushelicopter.com