

MINIMUM REQUIREMENTS – ALL CABIN CREW

Requirements

1. You must be at least 1.58m tall.
2. Over 18 years of age.
3. Have a high school education with a good command of written and spoken English.
4. Basic mathematics skills.
5. Have a good standard of health and fitness.
6. The applicant must have valid Passport
7. Have previous experience in hospitality or customer service.
8. A desire to work with people.
9. Content to work on a 24/7 roster.
10. No history of, or convictions for, substance abuse. Applicants will be required to undergo pre-employment Drug test

Note: The claims stated herein are required to be substantiated with ACCEPTABLE EVIDENCE AND SUPPORTING DOCUMENTS.

Other

1. Pass Interview and Questionnaire
2. Be prepared to allow Mandala Airlines or our representative, to contact previous employer/Regulators.

Experienced Cabin Crew

Applicants should possess the following minimum requirements

1. Flight Attendant training certificates
2. Minimum of 1 year become Flight attendant on A320 F Type

Note: Applicants who complete this form and who do not meet the above minimum requirements should not expect a reply from the Recruitment Team.

APPLICATION

POSITION APPLIED FOR

Cabin Crew

Experienced

Not Experienced

PERSONAL DETAILS

| | | | |
|-----------------------|-----------------------|--|-----------------------|
| Name | | | |
| | <i>(Family)</i> | <i>(First)</i> | <i>(Middle)</i> |
| Address | | | Tel No. |
| | | | Mobile |
| | | | Fax |
| | | | Email |
| Age | | Date of Birth | Place of Birth |
| Passport | Passport No | | Date Issued |
| | Place of Issue | | Date of Expiry |
| Nationality: | | | |
| Marital Status | | Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> | |

EMPLOYMENT DETAILS

| | | |
|---------------------------|--|-------------------------|
| Current Employer | | <i>(Date Commenced)</i> |
| Position Held | | |
| Salary Range | | |
| Last Employer | | From |
| Position Held | | To |
| Salary Range | | |
| Previous Employers | | From |
| Position Held | | To |
| Salary Range | | |
| Previous Employers | | From |
| Position Held | | To |
| Salary Range | | |
| Previous Employers | | From |
| Position Held | | To |
| Salary Range | | |

RECENT EXPERIENCE ON A320 FAMILY

| | | | |
|---|--|---|--|
| Date of Last SEP Training A320 F | | Expiry date of SEP Training Certificate A320 F | |
|---|--|---|--|

BACKGROUND QUESTIONNAIRE

| Please tick the appropriate box for each answer | No | Yes | If YES, please give details: |
|---|--------------------------|--------------------------|------------------------------|
| Have you ever been convicted of a criminal offence? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Has your cabin crew licence ever been revoked or suspended? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Have you ever been grounded for medical reasons or has the renewal of your licence ever been deferred on medical grounds? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Have you ever required treatment or counseling for drug or alcohol abuse? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Do you have any pre-existing medical condition/illness? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Do you suffer from any physical defect or partial disability? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Rate yourself in terms of knowledge of <u>in-flight safety</u> 1 to 10. | <input type="checkbox"/> | <input type="checkbox"/> | |
| Smoking is prohibited on our aircraft. Do you smoke? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Do you have any obligation to a long term employment or training bond with your current employer? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Have you been interviewed previously by Mandala Airlines? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Do you speak a foreign language? | <input type="checkbox"/> | <input type="checkbox"/> | |
| Briefly state why you wish to join Mandala Airlines | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |

| LICENCE DETAILS | | | | |
|-------------------------------|------------------|----------------|---------------------|----------------|
| Flight Attendant License Type | Country of Issue | Licence Number | Date of First Issue | Date of Expiry |
| | | | | |
| CRM Training | Country of Issue | Licence Number | Date of First Issue | Date of Expiry |
| | | | | |
| Dangerous Goods Training | Country of Issue | Licence Number | Date of First Issue | Date of Expiry |
| | | | | |
| Aviation Security Training | Country of Issue | Licence Number | Date of First Issue | Date of Expiry |
| | | | | |
| Medical Certificate | Country of Issue | Licence Number | Date of First Issue | Date of Expiry |
| | | | | |
| Emergency Drill Training | Country of Issue | Licence Number | Date of First Issue | Date of Expiry |
| | | | | |

| REFERENCES | | | |
|---|--|-------------|--|
| Please provide references from two previous employers. Include current email and telephone numbers. | | | |
| Name: | | Name: | |
| Position: | | Position: | |
| Tel Number: | | Tel Number: | |
| Email: | | Email: | |

DECLARATION

By submitting this form to you;

1. Hereby declare that the information given is true and correct and that I have not withheld any information which might affect my suitability for employment.
2. Understand that if Mandala Airlines discovers any false statement, omission, misrepresentation or adverse medical or health condition, it may lead to the withdrawal of the offer of employment or termination of employment.
3. Authorise Mandala Airlines to obtain references as necessary.

If submitted electronically;

By ticking this box, I verify the information provided on this form is true and correct

If printed please sign;

Signature _____

Date

ADDITIONAL DOCUMENTATION

Should you be contacted for Interview please ensure you bring clear copies of the following:

1. Cabin Crew Licences - Medical Certificate (if experienced)
2. Passport (relevant information pages)
3. Current CV / Resume
4. Police Criminal Record Check, obtained within the last three months
5. All Flight Attendant Training Certificates - CRM, Dangerous Goods, Aviation Security, Wet Drill, (if experienced)
6. Recommendation letter from the previous employer



Instructions

After completing this form in full, click on the "SUBMIT" button to email electronically.

Please attached a recent photograph to this email submission

| FOR OFFICE USE ONLY | | |
|---|--------------------------------------|--|
| Acceptable | Experienced <input type="checkbox"/> | Not Experienced <input type="checkbox"/> |
| Not currently acceptable <input type="checkbox"/> | | |
| Comments | | |
| PROCESS IMMEDIATELY | | |
| Employment Pack Sent | Date | |
| Interview Scheduled | Date | |
| | Passed <input type="checkbox"/> | Unsuccessful <input type="checkbox"/> |
| Contract Sent | Date | |
| HOLDING POOL | | |
| Holding Pool letter sent | Date | |
| Placed on Holding Pool list | Date | |
| NOT ACCEPTABLE | | |
| If unsuccessful Letter of unsuccessful application sent | Date | |