



CONFIDENTIAL APPLICATION

For

Name:

Date:

Samaritan Aviation
P.O. Box 20697
Mesa, AZ 85277
Office: 970-249-4341
samaviation.com
contact@samaritanaviation.com

Position that you are applying to fill:

- Pilot
- A&P Mechanic
- Avionics / Electronics
- Community Health Coordinator
- Spouse of person applying
- Administrative
- Specialist:
- Other:

Applying as:

- Long-Term Staff
- Short-Term Associate

Before you begin filling out the application:

The application is to assist you in clarifying your motivation to join Samaritan Aviation. The information that you provide will be strictly confidential, and your Information will only be seen by the interviewing and hiring committee.

- It will help you to read through the application before you begin providing your information.
- Be as transparent and thorough as possible.
- All married couples will need to fill out two applications.
- It is okay to add pages.

PERSONAL INFORMATION

Name _____
Last
First
Middle
Maiden

Nickname _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email Address _____

Permanent Address (if different from above) _____

Emergency Contact Person _____ Phone: _____

Date of Birth _____

Citizenship _____ Native born Naturalized / Yr _____

Marital status: Married Single Engaged *Separated *Divorced *Remarried Widowed

* Please briefly describe circumstances on separate paper. Separation, divorce, or remarriage does not preclude you from service. It is important for SA to have an explanation on file.

Date of Marriage _____

SPOUSE OR FIANCEE

Name _____

Last

First

Middle

Maiden

CHILDREN

Name

M / F

Birth Date

1. _____

2. _____

3. _____

4. _____

EDUCATION

High School Diploma: yes no

Summarize your educational history - technical, Bible, academic & specific occupational training courses:

School	Course	Dates (Yrs)	Diploma / Degree	For Office Use
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

EMPLOYMENT HISTORY

Please attach a copy of your resume and supply the information below regarding your last ten years of employment. Please fill in each section completely even if the requested information is also on your resume. (Start with your present or last job. You may also include any job related military service assignments, volunteer activities, or employment dating beyond ten years if it is relevant to your current goals. Attach a separate sheet if more space is necessary.)

Dates Employed: From:

To:

Salary:

/hourly

/monthly

Employer:

Phone:

Address:

City:

State:

ZIP:

Supervisor's name:

Title:

Position Held:

Description of Duties:

Reason for Leaving:

Dates Employed: From: To:
Salary: /hourly /monthly
Employer: Phone:
Address: City: State: ZIP:
Supervisor's name: Title:
Position Held:
Description of Duties:
Reason for Leaving:

Dates Employed: From: To:
Salary: /hourly /monthly
Employer: Phone:
Address: City: State: ZIP:
Supervisor's name: Title:
Position Held:
Description of Duties:
Reason for Leaving:

Dates Employed: From: To:
Salary: /hourly /monthly
Employer: Phone:
Address: City: State: ZIP:
Supervisor's name: Title:
Position Held:
Description of Duties:
Reason for Leaving:

Dates Employed: From: To:
Salary: /hourly /monthly
Employer: Phone:
Address: City: State: ZIP:
Supervisor's name: Title:
Position Held:
Description of Duties:
Reason for Leaving:

EMPLOYMENT OR OTHER WORK EXPERIENCE IN SPECIALTY FIELD

Company	From	To	Type of Work

Add any additional comments that you may want to mention regarding your specialty fields.

Have you ever been dismissed from any job? If so, explain.

How have you dealt with situations when someone in authority made a decision affecting you which you felt was wrong? Describe a specific experience if possible.

AUTOBIOGRAPHICAL SKETCH

Please describe **the main events of your lifetime**. It may take careful thought to cover all of them concisely. Experiences that were particularly pleasant or unpleasant should be definitely included and so indicated. Reference may be made to events covered in other parts of the questionnaire; please mention the page where they may be found. Describe the quality of your relationship with your parents and siblings in each section. Attach additional pages as necessary.

PRE-SCHOOL & ELEMENTARY SCHOOL YEARS

JR. HI / HIGH SCHOOL YEARS

COLLEGE / TECH SCHOOL YEARS

POST-SCHOOL YEARS TO PRESENT

FAMILY

Describe the following relationships:

1. Current relationship with your father:

2. Current relationship with your mother:

3. Quality of your parent's marriage:

4. Parents' feeling about your missionary purpose:

Describe any health factors, addictions or history within your immediate family that could effect your ability to serve in the field.

OBLIGATIONS / ACCOUNTABILITIES

LEGAL

Are you, or have you been, involved in lawsuits, legal litigation, name changes, bankruptcy, divorce, etc.? Have you ever been convicted or charged with a crime? If yes, please explain.

FAMILY

1. Is there anyone at home who would be dependent upon you for any kind of support while you are overseas?
 Yes No *If yes, to what extent is such support necessary, and how would you care for it?* _____

2. Is there any domestic situation which *might* interfere with your going overseas, or possibly cause premature return?
 Yes No *If yes, please explain.*

3. Are there any special educational needs for your children? (home / away, possible disabilities, etc.)

4. Would separation from family and close friends interfere with your going overseas, or possibly cause premature return?
 Yes No *If yes, please explain.*

FINANCIAL

1. Do you have major obligations (school loans, credit cards, etc.) which you must resolve before joining SAMARITAN AVIATION?
___ Yes ___ No *If yes, please describe.*

2. How soon can you clear major indebtedness?

3. If accepted, how do you plan to meet ongoing financial obligations?

Health

5. Do you have any medical conditions that would put you or others in harm while serving in a third-world environment?
___ Yes ___ No *If yes, please provide us with the necessary information.*

LANGUAGE

1. What other languages can you speak? To what degree?
2. What others have you studied in which you're not conversant?

CROSS-CULTURAL LIVING

1. Describe cross-cultural experiences you have had.
2. How do you feel you would adapt to living with inconveniences (boiling water, restricted electricity, etc.) and living distant from others of your own culture?
3. Samaritan Aviation may be serving in an environment that may exhibit political unrest. How would you feel about serving in such an environment?
4. What reservations might you have in working closely with and under leaders of other nationalities?
5. What would it take for you to be fulfilled in missionary service? How might this be different from your current situation?

OBJECTIVES

Samaritan Aviation exists to demonstrate God's love by providing aviation and medical services in remote areas. Discuss your ministry philosophy in relation to these objectives.

FINAL INFORMATION REQUEST

Are there any other facts (assets, abilities, limitations, concerns) that you feel Samaritan Aviation ought to know about you?

APPLICANT'S CONSENT TO REFERENCE CHECKING

As part of the hiring process, we will be checking your references. We may contact those persons whom you have identified as potential references or past employers. When we contact a reference, we may ask them questions about your educational background, general reputation, character, personal characteristics, habits and work experience. We may use an outside firm to check references. If we do, under the Federal Fair Credit Reporting Act we are required, upon your written request, to provide you with the name and address of the firm that is checking your references so that you may contact them for further information.

I have read and fully understand the foregoing. I hereby voluntarily consent to allow Samaritan Aviation, or any of its officers, employees, agents or designees to check my references by contacting any person whom they deem to be an appropriate reference in asking any questions which they consider relevant to their hiring decision, including questions about my educational background, and work experience.

I hereby authorize any persons, companies, organizations, or corporations to answer all questions or release any information regarding the items listed in this Paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I release Samaritan Aviation to conduct a personal background check.

Signature

Date

REFERENCES

Please make sure you list a pastor, present employer, parent and professional in your field. Please make sure to include the City, State and Zip Code for each reference.

1.	Name	_____	Relationship	_____
				(Pastor who knows you well)
	Address	_____	Phone #	_____
		_____	E-mail	_____
2.	Name	_____	Relationship	_____
				(Past Employer)
	Address	_____	Phone #	_____
		_____	E-mail	_____
3.	Name	_____	Relationship	_____
				(Present employer)
	Address	_____	Phone #	_____
		_____	E-mail	_____
4.	Name	_____	Relationship	_____
				(Parent)
	Address	_____	Phone #	_____
		_____	E-mail	_____
5.	Name	_____	Relationship	_____
				(Professional in your field)
	Address	_____	Phone #	_____
		_____	E-mail	_____

SAMARITAN AVIATION STATEMENT OF FAITH

1. The divine inspiration of the Bible; that it is inerrant in the original writings, and is of supreme and final authority in faith and practice.
2. One Triune God, eternally existing in three persons: Father, Son and Holy Spirit.
3. The deity of Jesus Christ, His virgin birth, perfect life, redeeming death, bodily resurrection, heavenly intercession, and the expectation of the personal, visible return of the Lord Jesus Christ in power and glory.
4. The creation of man in the divine image, man's subsequent fall through sin, resulting in universal guilt and total depravity; and the necessity, therefore, of redemption and restoration.
5. The personality of the Holy Spirit by Whose regenerative work sinful man is born again, and by whose indwelling regenerate man is enabled to live a godly life.
6. The bodily resurrection of the just and the unjust, the everlasting blessedness of the saved, and the everlasting punishment of the lost.
7. The spiritual unity of all believers as comprising the true Church, which has the duty to preach the Gospel to every creature.

Signature

Date

CHECKLIST

Send copies of all:

- Transcripts (College, University, and Tech School)
- Diplomas (College, University, and Tech School)
- Documents substantiating Bible course work

To: Samaritan Aviation
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Mesa, AZ 85277

Include copies of the following with your application:

- FAA / FCC licenses
- FAA medical – Current 2nd Class Medical
- Passport Information Page (if available)
- Resume (most recent)
- Licenses and/or Credentials

Make copy of application and all accompanying documents for your file.

APPLICANTS STATEMENT

This application will be kept active for a period of two years and then deactivated if candidacy is not initiated.

I authorize investigation of all statements contained in this application as may be necessary in arriving at a decision regarding my status with Samaritan Aviation.

In the event of my acceptance to Samaritan Aviation, I understand that false or misleading information given in my application or interview(s) may result in disqualification and / or discharge.

I have read and understand these statements and certify that the information contained in this application and accompanying documents are true and complete to the best of my knowledge.

Signature

Date

At:

(City)

(State)

(Country)

Please attach a photograph of you
(and your family where applicable) on a separate document or PDF to be sent along with
this application.