

APPLICATION FORM

Cabin Crew



CANDIDATE DETAILS

Full name:	Date of birth:
Email:	Mobile:
Residence (city/country):	
Permit: [] CH/EU/EFTA [] Other state w/ Permit	Notice period:

RECENT HISTORY

Cover the five years preceding your application with exact dates in the format DD/MM/YYYY. Include employment, education or training, self-employment, unemployment or job-seeking, military or civil service, and extended travel. The chronology must not contain an unexplained gap longer than 28 days. For employment entries, provide a verifier and a work certificate or confirmation.

Period from to	Company company name city, country	Function	Reference Person name: function:	Evidence yes/no

CABIN CREW EXPERIENCE (fill in only if previous cabin crew experience)

Airline(s)/Operator(s):	Most Recent Position/Rank:		Last Operating Date:
Operated Aircraft Type(s):	EASA CC Attestation [] Yes [] No	EASA CC Medical [] Valid [] Expired [] No	Other Qualifications:

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CABIN CREW EXPERIENCE

Verification and declaration

- ☐ I confirm that my five-year history is complete and contains no unexplained gap longer than 28 days.
- ☐ I confirm that the information and documents provided are complete and accurate to the best of my knowledge.
- ☐ I authorise Chair Airlines to contact the verification persons listed in this form solely to verify my employment or activity history and relevant qualifications. I confirm that I have informed them that their contact details have been provided.

Candidate Signature

Place

Date

Please send the following attachments with your CV including a photo to fly@chair.ch:

- Motivation Letter
- CV
- Work Reference letter
- CC Attestation, if applicable
- CC Medical, if applicable