

APPLICATION FOR EMPLOYMENT



Greenbrier Valley Airport

584 AIRPORT ROAD BOX 1 LEWISBURG, WV 24901
PHONE (304) 645-3961

GENERAL INFORMATION

NAME (LAST)		(FIRST)		MIDDLE INITIAL	
MAILING ADDRESS			CITY	STATE	ZIP CODE
PHONE (MAIN)	PHONE (ALTERANATE)		EMAIL		

POSITION DESIRED

POSITION OR TYPE OF EMPLOYMENT	WILL ACCEPT (PLEASE CHECK) FULL TIME PART TIME () ()	GREENBRIER VALLEY AIRPORT IS A 24/7 OPERATION. ARE YOU WILLING TO ACCEPT A VARIABLE SCHEDULE? Y/N	<input type="checkbox"/>
ARE YOU ABLE TO PERFORM THE JOB FUNCTIONS WITHOUT REASONABLE ACCOMODATIONS? (PLEASE CHECK)			YES NO
DESIRED SALARY	IF CURRENTLY EMPLOYED, HOW MUCH NOTICE DO YOU NEED TO GIVE CURRENT EMPLOYER?	IF HIRED-DATE AVAILABLE TO BEGIN WORK?	

EDUCATION

NAME OF HIGH SCHOOL		ADDRESS OF HIGH SCHOOL ATTENDED	
YEAR GRADUATED		CERTIFICATES EARNED	
COLLEGE, BUSINESS SCHOOL, TRADE SCHOOL, ETC. NAME AND LOCATION OBTAINED?			DEGREE YES NO
MAJOR/COURSE STUDY			
COLLEGE, BUSINESS SCHOOL, TRADE SCHOOL, ETC. NAME AND LOCATION OBTAINED?			DEGREE YES NO

EDUCATION CONTINUED

NAME OF HIGH SCHOOL		ADDRESS OF HIGH SCHOOL ATTENDED	
YEAR GRADUATED		CERTIFICATES EARNED	
MAJOR/COURSE STUDY			
COLLEGE, BUSINESS SCHOOL, TRADE SCHOOL, ETC. NAME AND LOCATION OBTAINED?			DEGREE YES NO
MAJOR/COURSE STUDY			

MILITARY EXPERIENCE

ARE YOU CURRENTLY SERVING OR DO YOU HAVE PREVIOUS MILITARY EXPERIENCE? (PLEASE CHECK)	YES	NO
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CERTIFICATES AND LICENSES

Type	
Date Issued:	Expiration Date:
License Number:	
Issuing Agency:	

Type	
Date Issued:	Expiration Date:
License Number:	
Issuing Agency:	

SKILLS

Skill:
Skill:

WORK EXPERIENCE (MOST RECENT FIRST)

FROM (MONTH/YEAR)	TO (MONTH/YEAR)		
NAME OF EMPLOYER		TELEPHONE NUMBER	
ADDRESS OF EMPLOYER			
JOB TITLE	SALARY	SUPERVISOR	
REASON FOR LEAVING			
DUTIES PERFORMED			

MAY WE CONTACT THE EMPLOYER? YES _____ NO _____

FROM (MONTH/YEAR)	TO (MONTH/YEAR)		
NAME OF EMPLOYER		TELEPHONE NUMBER	
ADDRESS OF EMPLOYER			
JOB TITLE	SALARY	SUPERVISOR	
REASON FOR LEAVING			
DUTIES PERFORMED			

MAY WE CONTACT THE EMPLOYER? YES _____ NO _____

WORK EXPERIENCE CONTINUED

FROM (MONTH/YEAR)	TO (MONTH/YEAR)		
NAME OF EMPLOYER			TELEPHONE NUMBER
ADDRESS OF EMPLOYER			
JOB TITLE	SALARY	SUPERVISOR	
REASON FOR LEAVING			
DUTIES PERFORMED			

MAY WE CONTACT THE EMPLOYER? YES _____ NO _____

REFERENCES – *Please provide three references that we may contact (no relatives please)*

NAME:	TELEPHONE NUMBER:
NAME:	TELEPHONE NUMBER:
NAME:	TELEPHONE NUMBER:

NOTE:

1. IF HIRED, YOU WILL BE HIRED ON A NINETY (90) DAY PROBATIONARY PERIOD.
2. IF HIRED, PLEASE ACKNOWLEDGE THAT YOU UNDERSTAND YOU ARE AN AT WILL EMPLOYEE-(GREENBRIER VALLEY AIRPORT RESERVES THE RIGHT TO HIRE OR FIRE AT THE DISCRETION OF THE BOARD OR MANAGEMENT OF THE AIRPORT.)
BY SIGNING BELOW YOU ACCEPT AND ACKNOWLEDGE THE ABOVE AS STATED (ITEMS 1 AND 2 ABOVE)

X

APPLICANT SIGNATURE

DATE

PLEASE SUBMIT ALL APPLICATIONS AT GVA ADMINISTRATIVE OFFICES LOCATED IN THE AIRLINE TERMINAL DURING NORMAL BUSINESS HOURS MON-FRI 8:00AM-4:00PM.

or Email: martha@gvairport.com