APPLICATION FOR EMPLOYMENT

Nevada & Grand Canyon West Rim

APPLICANT INSTRUCTIONS

Complete all applicable sections of this fillable application. Save the completed application as a PDF. Create a new email, attach the entire saved PDF, and send it to **nvcareers@papillon.com** In the subject line, enter the position for which you are applying.
We are an equal opportunity employer.

APPLICANT INFORMATION

Application date (MM/DD/YYYY)

Applicant Legal name (Last, First, Middle, Suffix).

Preferred name

Street address

City

State

ZIP

Phone

Email

Preferred contact method

Other names used for employment, education, licensing, or credential verification (optional)

Are you at least 18 years old?

☐ Yes ☐ No

Are you legally authorized to work in the United States?

☐ Yes ☐ No

If hired, you must complete Form I-9 and provide acceptable documentation. The company does not request specific documents at the application stage.
USCIS Form I-9 acceptable documents: **https://www.uscis.gov/i-9-central/form-i-9-acceptable-documents**

POSITION AND LOCATION

Position applied for

Available start date

Desired pay range

Company (check all that apply)

☐ Papillon Helicopters ☐ Grand Canyon Scenic Airlines

Work location(s)

☐ AZ - South Rim ☐ AZ - West Rim ☐ NV - Las Vegas ☐ NV - Boulder City ☐ Other:

How did you hear about us?

Employment sought

☐ Full-time ☐ Part-time ☐ Seasonal

Can you perform the essential job functions, with or without reasonable accommodation?

☐ Yes ☐ No

Are you willing to travel if the position requires it?

☐ Yes ☐ No

Are you willing to fly if the position requires it?

☐ Yes ☐ No

Are you willing to relocate if the position requires it?

☐ Yes ☐ No

Are you willing to drive if the position requires it?

☐ Yes ☐ No

AVAILABILITY

Days available (Sun-Sat)

Hours / shifts available

Scheduling limitations

☐ Available weekends ☐ Available holidays ☐ Available overtime

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Complete the sections relevant to the position. Use concise examples and list current licenses or certifications with expiration dates when applicable.

MILITARY EXPERIENCE (OPTIONAL)

Completion is voluntary. Leave blank if not applicable.

DoD SkillBridge applicant? ☐ Yes ☐ No If yes, list dates of availability

Branch of service

Component (Active, Reserve, or Guard)

Dates of service (from / to)

Rank or pay grade at separation

Military occupation, specialty, or job title

Relevant military training, experience, licenses, or certifications

EDUCATION, TRAINING AND CREDENTIALS

Highest relevant education, training, license, or certification

Required license/certificate and expiration date (if applicable)

TECHNOLOGY SKILLS

Technology used professionally, including software, AI tools, automation, reservation systems, maintenance systems, and hardware

Describe your proficiency, recent experience, and how you have used these technologies to improve accuracy, efficiency, customer service, or decision-making

LANGUAGE AND COMMUNICATION SKILLS

Languages used professionally, including ASL or other sign languages

Speaking / reading / writing / signing / interpreting

ADMINISTRATIVE SKILLS

Examples: scheduling, records, customer service, purchasing, accounting, payroll, data entry, and office administration

CASH HANDLING AND TRANSACTION SKILLS

Examples: cash handling, point-of-sale (POS) systems, credit-card transactions, deposits, balancing cash drawers, reconciliation, refunds, and fraud or loss-prevention procedures

PHOTOGRAPHY SKILLS

Examples: Adobe Lightroom, Adobe Photoshop, Capture One, Canva, Photo Mechanic, and other photo-editing or asset-management software

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Complete the sections relevant to the position. Provide concise examples of responsibilities, results, training, systems, or regulated work.

SALES AND MARKETING SKILLS

Examples: customer acquisition, sales, reservations, account management, promotions, digital marketing, social media, or performance results

AVIATION OPERATIONS AND GROUND SUPPORT SKILLS

Examples: flight following, dispatch, ramp/flight-line operations, passenger and baggage handling, fueling, fuel truck driving, and radio communications

SAFETY AND COMPLIANCE SKILLS

Examples: SMS, OSHA, FARs, FAA/DOT compliance, audits, incident reporting, risk management, SDS, chemical/cleaning-supply safety, hazard communication, and HAZMAT

DRUG AND ALCOHOL PROGRAM EXPERIENCE

Examples: DOT/FAA testing program administration, DER duties, testing coordination, random pools, records, training, or policy compliance

MANAGEMENT AND LEADERSHIP SKILLS

Examples: Leadership, team size, supervision, coaching, training, budgeting, operational planning, project management

VEHICLE MAINTENANCE SKILLS

Examples: preventive maintenance, inspections, oil and fluid changes, tire and brake service, battery replacement, minor repairs, troubleshooting, maintenance records, and fleet upkeep

FACILITY MAINTENANCE, JANITORIAL, LANDSCAPING AND HOUSEKEEPING SKILLS

Examples: preventive maintenance, minor repairs, cleaning and sanitation, floor care, groundskeeping, landscaping equipment, room or facility inspections, and supply inventory

OTHER JOB-RELATED QUALIFICATIONS

Other job-related skills, equipment, credentials, or qualifications

APPLICANT STATEMENT - INTEREST AND QUALIFICATIONS (OPTIONAL)

Why are you interested in this position, and what experience, skills, training, or accomplishments make you a strong candidate?

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Complete this page only for a position that requires driving. Provide job-related driving information only. Any MVR or consumer-report authorization will be obtained on a separate form.

DRIVER'S LICENSE INFORMATION

Driver's license number

Issuing state

Driver's license class

Issue date (MM/DD/YYYY)

Expiration date (MM/DD/YYYY)

Vehicle types / models driven

Do you have a current commercial driver's license (CDL)?

☐ Yes ☐ No

CDL class

☐ A ☐ B ☐ C

CDL endorsements

☐ H ☐ N ☐ P

☐ S ☐ T ☐ X

PROFESSIONAL DRIVING EXPERIENCE

Check each vehicle type you have operated professionally.

☐ Limousine ☐ Shuttle van/bus ☐ Humvee/tour vehicle

☐ Passenger bus ☐ Motorcoach ☐ Fuel truck

Have you driven a commercial motor vehicle for an employer in a position regulated by the U.S. Department of Transportation (DOT)?

☐ Yes ☐ No

If yes, identify employer(s), vehicle type, and approximate dates

MOTOR VEHICLE RECORD (MVR)

Do you have a current copy of your motor vehicle record (MVR) or DMV driving record?

☐ Yes ☐ No

If requested, are you willing to sign a separate authorization allowing the company to obtain an MVR?

☐ Yes ☐ No

MOTOR VEHICLE ACCIDENT HISTORY

Have you been involved in any motor vehicle accident during the past three years?

☐ Yes ☐ No

If yes, list each accident. Do not provide medical information.

ACCIDENT 1

Date | Location | Brief description and outcome

ACCIDENT 2

Date | Location | Brief description and outcome

ACCIDENT 3

Date | Location | Brief description and outcome

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Complete this page only for a pilot position. Provide current, accurate, job-related certificate and flight-experience information. Use whole or decimal hours consistently.

FAA PILOT CERTIFICATES AND QUALIFICATIONS

Do you hold a current FAA commercial pilot certificate?

☐ Yes ☐ No

Do you hold a current FAA Airline Transport Pilot (ATP) certificate?

☐ Yes ☐ No

FAA medical certificate class

☐ First ☐ Second ☐ Third ☐ Other / none

Last date flown (MM/DD/YYYY)

Do you have pilot experience conducting operations under FAA Part 135?

☐ Yes ☐ No

If yes, years / role / operator

AIRCRAFT CATEGORY EXPERIENCE

Which aircraft categories have you flown? Check all that apply.

☐ Helicopter ☐ Fixed-wing Aircraft type(s)

FLIGHT INSTRUCTOR CERTIFICATIONS

Current FAA instructor certificates or ratings - check all that apply.

☐ CFI ☐ CFII ☐ MEI ☐ Ground instructor ☐ None

Instructor certificate number(s), ratings, expiration information, and instructional experience

FLIGHT HOURS

Enter hours only in the aircraft category to which they apply. PIC means pilot-in-command.

HELICOPTER FLIGHT HOURS

Total hours | PIC hours | Turbine - total | Turbine - PIC

Night | Cross-country | Instrument - actual | Instrument - simulated

Mountain / terrain | External load / longline

FIXED-WING FLIGHT HOURS

Total hours | PIC hours | Multi-engine - total | Multi-engine - PIC

Turbine - total | Turbine - PIC | Night | Cross-country

Instrument - actual | Instrument - simulated

Additional pilot qualifications or operational experience

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Complete this page only for an aircraft maintenance position. Provide current, job-related information and attach a continuation page if needed.

FAA MECHANIC CERTIFICATE STATUS

Check the FAA mechanic certificate rating(s) you currently hold.

☐ Airframe (A) ☐ Powerplant (P) ☐ Airframe and Powerplant (A&P) ☐ Apprentice ☐ None

☐ Inspection Authorization (IA)

FAA mechanic certificate number

Years of experience

Maintenance school attended

Did you graduate?

☐ Yes ☐ No

AIRCRAFT MAINTENANCE EXPERIENCE

Do you have aircraft maintenance experience supporting operations conducted under FAA Part 135?

☐ Yes ☐ No

If yes, years/operator/role

Aircraft categories maintained (for example, helicopter, fixed-wing, turbine, or reciprocating)

Aircraft, engines, or systems maintained

AIRCRAFT PARTS EXPERIENCE

Examples: receiving, inspection, inventory control, traceability, shelf-life monitoring, parts documentation, shipping, and HAZMAT handling

AIRCRAFT QUALITY CONTROL EXPERIENCE

Examples: inspections, audits, maintenance-record review, regulatory compliance, return-to-service documentation, corrective actions, and quality systems

AIRCRAFT RECORDS EXPERIENCE

Examples: logbooks, work orders, maintenance tracking systems, component histories, ADs, service bulletins, records audits, and document retention

APPRENTICE A&P COMMITMENT

For aircraft mechanic apprentice applicants only: If hired into an apprentice position, I agree to actively work toward FAA Airframe and Powerplant certification within the timeframe communicated in writing by the company, subject to applicable policy and law.

☐ I agree (apprentice applicants only)

Applicant initials

Target completion date

Additional aircraft maintenance information

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Starting with the most recent, list your employment or other work-related activities for the past ten years, including self-employment when applicable. Attach a continuation page if additional space is needed. Please do not type "see resume". All fields must be thoroughly completed.

EMPLOYMENT 1 - MOST RECENT

Employer / organization name | Phone | From (MM/YYYY) | To (MM/YYYY)

Street address | City, state, ZIP

Employer website | Job title | Supervisor

May we contact this employer? ☐ Yes ☐ No

DOT-regulated position or subject to DOT testing? ☐ Yes ☐ No ☐ Unsure

Contract position? ☐ Yes ☐ No

Reason for leaving

Primary duties and responsibilities

EMPLOYMENT 2 - PREVIOUS

Employer / organization name | Phone | From (MM/YYYY) | To (MM/YYYY)

Street address | City, state, ZIP

Employer website | Job title | Supervisor

May we contact this employer? ☐ Yes ☐ No

DOT-regulated position or subject to DOT testing? ☐ Yes ☐ No ☐ Unsure

Contract position? ☐ Yes ☐ No

Reason for leaving

Primary duties and responsibilities

EMPLOYMENT 3 - PREVIOUS

Employer / organization name | Phone | From (MM/YYYY) | To (MM/YYYY)

Street address | City, state, ZIP

Employer website | Job title | Supervisor

May we contact this employer? ☐ Yes ☐ No

DOT-regulated position or subject to DOT testing? ☐ Yes ☐ No ☐ Unsure

Contract position? ☐ Yes ☐ No

Reason for leaving

Primary duties and responsibilities

EMPLOYMENT GAPS

Explain any gaps in employment history, including dates (MM/YYYY-MM/YYYY). If none, enter "None."

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PROFESSIONAL REFERENCES

Provide three professional references who can speak to your work experience or qualifications.

REFERENCE 1

Name

Professional relationship / company

Phone number

Email address

REFERENCE 2

Name

Professional relationship / company

Phone number

Email address

REFERENCE 3

Name

Professional relationship / company

Phone number

Email address

COMPANY RELATIONSHIPS AND JOB-RELATED INFORMATION

Do you have a relative or in-law currently employed by Papillon Helicopters, Grand Canyon Scenic Airlines, or another affiliated company under common ownership?

☐ Yes ☐ No

If yes: name, relationship, company, and location

Have you previously worked for Papillon Helicopters, Grand Canyon Scenic Airlines, or another affiliated company under common ownership?

☐ Yes ☐ No

If yes: company, position, location, dates

Have you been convicted of a crime, including a felony or traffic violation?

☐ Yes ☐ No

If yes: offense, date, jurisdiction, disposition

APPLICANT CERTIFICATION

I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that material misrepresentations or omissions may result in withdrawal of an offer or termination of employment, subject to applicable law. I authorize the company to verify the job-related information provided and to contact the employers and references identified above, except where I indicated otherwise. This application is not a contract of employment. If hired, employment is at will, subject to applicable law and any written agreement signed by an authorized company representative.

Any consumer-report background check, MVR, medical inquiry or examination, drug/alcohol test, or voluntary demographic self-identification will be handled through separate notices or forms at the legally appropriate stage.

I consent to complete and sign this application electronically. By selecting I agree and typing my full legal name below, I intend to sign this application electronically and understand that my typed name constitutes my electronic signature with the same effect as a handwritten signature. I may instead print and sign the application by hand.

☐ I agree to use an electronic signature

Applicant electronic signature (type full legal name)

Date (MM/DD/YYYY)

WORKPLACE AND SAFETY REQUIREMENTS

We are a safety-sensitive employer.

If hired, can you comply with the company's position-specific dress, grooming, uniform, and personal protective equipment requirements? ☐ Yes ☐ No

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VOLUNTARY EEO SELF-IDENTIFICATION FORM (OPTIONAL)

VOLUNTARY EEO DEMOGRAPHIC SELF-IDENTIFICATION

Providing the information below is optional. You may choose not to answer any question.
Responses will be handled confidentially and used only for lawful purposes.

Applicant Legal name (Last, First, Middle, Suffix).

Position applied for

Date (MM/DD/YYYY)

SEX - CHOOSE ONE

- ☐ Male
- ☐ Female
- ☐ I prefer not to answer.

ETHNICITY - CHOOSE ONE

- ☐ Hispanic or Latino
- ☐ Not Hispanic or Latino
- ☐ I prefer not to answer.

RACE - CHECK ONE OR MORE

- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Black or African American
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ I prefer not to answer.

VOLUNTARY VETERAN STATUS

Papillon Helicopters and Grand Canyon Scenic Airlines value the experience and skills of individuals who have served in the United States uniformed services. The following information is requested solely to evaluate our veteran outreach and recruitment efforts. Providing this information is voluntary. Your response will be kept separate from materials used to make employment decisions, will not affect your consideration for employment, and will be used only for lawful outreach and reporting purposes.

- ☐ I am a veteran of the United States uniformed services.
- ☐ I am not a veteran.
- ☐ I prefer not to answer.

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