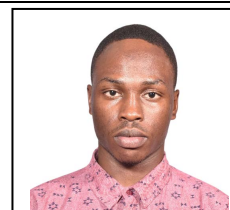




# The Apollo Group



## APPLICATION FOR EMPLOYMENT

USING LEGIBLE PRINT, PLEASE COMPLETE THIS FORM IN ITS ENTIRETY

### 1. Personal Information

Last Name: MWANGI

First Name: SAMUEL

Middle Name(s): MAINA

Date of Birth (mm/dd/yyyy): 04/20/2002

Birth Place (city): NAIROBI

Country of Birth: KENYA

Nationality: KENYAN

Gender:  Male  Female

Hair Color: BLACK

Weight: \_\_\_\_\_ lbs. *or* 68 kgs.

Height: 5 feet 7 inches *or* \_\_\_\_\_ cm

Do you have Tattoos?  No  Yes

Are the tattoos visible when wearing short-sleeved shirts, shorts or skirts?  No  Yes

### 2. Contact Information

#### Permanent Address

Street 1: P.O. BOX 13100

Street 2:

City: NAIROBI

State/Province: NAIROBI

Zip/Postal Code: 00100

Country: KENYA

#### Phone Numbers (include country codes and area codes) and E-mail

Home Phone: +254743628317

Mobile Phone: +254743628317

E-mail Address: sm886120@gmail.com

### 3. Dependant Information

Marital Status:  Single  Married  Divorced  Widowed  Other

Number of children under 18 years of age?

#### Emergency Contact Information

In the event of an emergency, I would like the company to contact the following person or persons:

##### Person 1

Relationship: FATHER

Last Name: MAINA

First Name: JOSEPH

Middle Name(s): MWANGI

Home Phone: +254722873893

Mobile Phone: +254722873893

E-mail Address: mwajose123@gmail.com

##### Person 2

Relationship: MOTHER

Last Name: MWANGI

First Name: TERESIA

Middle Name(s): WANJA

Home Phone: +254722893704

Mobile Phone: +254722893704

E-mail Address: wanjamwangi254@gmail.com

4. Position Desired				
Position Desired:		Salary Desired (USD):		
Have you worked on cruise ships before: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list last company:		
5. Documentation Information				
Passport Information				
Passport Number:		Passport Nationality:		
Date of Issue (mm/dd/yyyy):		Place of Issue:		
Date of Expiration (mm/dd/yyyy):				
Crew Visas				
Type:	Yes/No	Date of Expiration (mm/dd/yyyy):	Visa No:	Type:
C1/D:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
C1:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
D:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Schengen:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other 1:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other 2:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
STCW Certification				
Type:	Yes/No	Date of Expiration (mm/dd/yyyy):	Certificate Number:	
Elementary First Aid (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Fire Prevention & Fire Fighting (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Personal Safety & Social Responsibility (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Personal Survival Techniques (BST)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Crowd Management & Passenger Safety	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Crisis Management & Human Behavior	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Security Awareness	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Seaman's Books				
Type:	Yes/No	Date of Expiration (mm/dd/yyyy):	Number:	Nationality:
National:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Flag State 1:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Flag State 2:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Other Certificates				
Type	Yes/No or Not Applicable:	Date of Issue (mm/dd/yyyy):	Date of Expiration (mm/dd/yyyy):	Comments:
Ship's Cook	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			
Other 1:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A			

**6. Employment History**

List most recent employer first

Employer/Company Name:	Company Phone No: +254111623592
Position Held: ASSISTANT STEWARD	Supervisor Name: FRANKNLY MBAABU
From (mm/dd/yyyy): 05/09/2022	To (mm/dd/yyyy): 10/28/2022
Starting Salary in USD: 200	Ending Salary in USD: 200
Reason for Leaving: COMPANY RESTRUCTURING	

Employer/Company Name: SAGAS HOTEL	Company Phone No: +254706669766
Position Held: ASSISTANT STEWARD	Supervisor Name: GITAHY NDIRANGU
From (mm/dd/yyyy): 02/21/2022	To (mm/dd/yyyy): 05/01/2022
Starting Salary in USD: 150	Ending Salary in USD: 150
Reason for Leaving: COMPANY RESTRUCTURING	

Employer/Company Name: SINYORA LOUNGE & RESTAURANT	Company Phone No: +254701446703
Position Held: ASSISTANT STEWARD	Supervisor Name: RAYMOND KINOTI
From (mm/dd/yyyy): 11/16/2022	To (mm/dd/yyyy): 02/12/2022
Starting Salary in USD: 100	Ending Salary in USD: 100
Reason for Leaving: COMPANY RESTRUCTURING	


**7. Education**

	School Name and City	No. of Years	From (mm/dd/yyyy):	To (mm/dd/yyyy):	Major/Diploma
High School:	MOI FORCES ACADEMY SCHOOL	4			KCSE
College:	BOMA INTERNATIONAL COLLEGE	1			CERTIFICATE IN HOSPITALITY AND MANAGEMENT
University:					
Apprenticeship:					
Other:					

**8. Languages**

Language:	Proficiency Level Speak:	Proficiency Level Write:
English (mandatory):	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
Spanish:	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
French:	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
German:	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> N/A <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
Other 1 _____:	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent
Other 2 _____:	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent	<input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Fluent

I hereby certify that all information contained in this application form is true and correct, and I understand that any mis-representation or intentional omissions are grounds for denial of hire or reason for dismissal.

  
 \_\_\_\_\_  
 Signature of Applicant

\_\_\_\_\_  
 Date (mm/dd/yyyy)

**Please do not write in the space below. This section is to be completed by the recruitment agency.**

Agency Name:		Location:	
Prescreened: <input type="checkbox"/> Yes <input type="checkbox"/> No	Name of Prescreener:		Date of Prescreen:
References checked: <input type="checkbox"/> Yes <input type="checkbox"/> No	References checked by:		
Criminal Background Check: <input type="checkbox"/> Yes <input type="checkbox"/> No	Background checked by:		
Applicant has been provided with: <input type="checkbox"/> Job Description <input type="checkbox"/> General BYSS <input type="checkbox"/> Departmental BYSS			

**Interview Results:**

Apollo Interviewer:
Comments / Observations:

Date:	Division:
Approved Position:	
Approved Salary:	Overall Rating <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
English <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Tech. Prof. <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
Attitude <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Grooming <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
Social Skill <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Energy <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1
Org. Fit <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1	Confidence <input type="checkbox"/> 5 <input type="checkbox"/> 4 <input type="checkbox"/> 3 <input type="checkbox"/> 2 <input type="checkbox"/> 1