# STANDARD CABIN CREW SCREENING FORM

## APPLICANT INFORMATION (Please write clearly)

**Full Name** _____
**(Last Name)** **(First Name)** **(Middle Name)**

| | | | |
|---|---|---|---|
| **Date of Birth/Age** | **(Month/Date/Year - Age)** | **Height** | **CM** |
| **Passport Validity** | | **Weight** | **KG (current)** |
| **Civil Status** | | **Weight** | **KG (over/under)** (Leave this blank) |

## PHYSICAL SCREENING (To be filled out by IPAMS Recruitment Officer)

| | | | | |
|---|---|---|---|---|
| **FACE** | | | | |
| **TEETH** | | | | |
| **ARMS** | | | | |
| **LEGS** | | | | |
| **COMPLEXION** | | | | |
| **REACH TEST** | **Both** | **Right** | **Left** | **Below 212 CM** |
| **GROOMING** | | | | |
| **Comm. Skills & Personality** | | | | |
| **Work, Family and Scholastic Background** | | | | |
| **Date of Last Application** | | | | |
| **ASSESMENT and RECOMMENDATION** | | | | |
| **1** | **1.5** | **2** | **RESERVED** | **POOLING** |

| | |
|---|---|
| **Evaluated By:** (Initial) | **Date:** |
| **Evaluated By:** (Second Screening/Final) | **Date:** |


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