

**American Eagle
TWU Transfer Form**

Employee Information:

Name _____
Employee Number _____
Current Location _____
Company Seniority _____
Home Phone _____

Company Code _____
Current Position _____
Station/Branch _____
Occupational Seniority _____
Work Phone _____

Position Applying For:

Job Title _____
Full Time / Part Time _____

Location _____

Signatures:

Employee Signature _____ Date _____

Supervisor's Name _____

Supervisor's Signature _____ Date _____

Supervisor's AANet Phone _____

Supervisor's Comments _____

Submit to:

Comat: American Eagle Recruitment
Attn. Lesley Barrett
TWU Transfers – MD 4147 HDQ

US Mail: American Eagle
PO Box 619415 MD 4147
DFW Aiport, TX 75261-9415
Attn. Recruitment – Lesley Barrett

Fax: ICS (or area code 817) 963-2004

Administrative use only: Job Code _____ Received _____