

Application for Employment please attach a resume

		Applicant Information	on	
Full Name:			Date	»:
	Last	First	M.I.	
Address:	Street Address			Apartment/Unit #
	0"			710.0 /
Phone:	City	Email	State	ZIP Code
Position App	olled for:			
How did yo	u learn about the positio	n?		
		List Last 3 Employe	rs	
Company:			Phone:	
Address:			Supervisor:	
Job Title:		Liked most about job?	Liked least about job?	
Responsibil	ities:			
From:	To:	Reason for Leaving:		
Company:			Phone:_	
Address:			Supervisor:	
Job Title:		Liked most about job?	Liked least about job?	
Responsibil	ities:			
From:	To:	Reason for Leaving:		
Company:			Phone:	
Address:			Supervisor:	
Job Title:		Liked most about job?	Liked least about job?	
Responsibil	ities:			
From:	To:	Reason for Leaving:		

		Educ	cation		
High School:		Laa			
Years Completed:	Did you YES N graduate? ☐ [
College:			Address:		
Years Completed:	Did you YES N graduate?	IO Degree:	-		
Trade School:			Address:		
Years	Did you YES N	O Completion	-		
Completed:	graduate? [Certificate			
		Skills & Q	ualifications		
Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for					
which you are app	lying				
		Refe	rences		
Please attach at least one personal and one professional reference including contact information and description of relationship.					
		Disclaimer a	and Signature		
I certify that all inform	ation I have provided in			oloyer is true, complete and correct.	
references (personal the accuracy of all inf have regarding the	and professional), empormation provided by memployer, its agents,	oloyers, public agencies, ne in this application, resu employees or representa	licensing authorities an ume or job interview. I atives, for seeking, ga	agents to contact and obtain information from all deducational institutions and to otherwise verify hereby waive any and all rights and claims I may athering and using truthful and non-defamatory as or organizations for furnishing such information	
purpose of limiting religion, national or Agency likewise do other protected stat gestures, unwelcom derogatory pictures person because of committed by a magnetic statement of the statement of	or excluding an app gin, citizenship, age, es not tolerate harass us. Examples of pro ne comments, jokes, or other graphic mat his/her membership in anager, coworker, su	licant from consideratidisability, or any other ment based on sex, rachibited harassment inclepithets, threats, insulerials, and any other won a protected category.	on from employment protected status unde e, color, religion, natiude, but are not limits, name-calling, negords or conduct that contact that contact are soloyee (such as a vertical coloyee)	lo question on this application is used for the on the basis of his or her sex, race, color, er applicable federal, state, or local law. This onal origin, citizenship, age, disability, or any ed to, unwelcome physical contact, offensive ative stereotyping, possession or display of demean, stigmatize, intimidate, or single out a employees is strictly prohibited, whether it is endor or customer). The Agency takes all nd thoroughly.	
I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment, or may result in my immediate discharge from the employer's service, whenever it is discovered.					
This application will re	emain on file for 6 mont	hs.			
Signature:				Date:	

This application and your resume may be submitted by: (1) Mail to or drop off in person at 3094 Elua Street, Lihue, HI 96766 (2) E-mail a scanned and signed copy to hr@ywcakauai.org or (3) Fax to 808.245.5961.