Date of Application \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



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| WE ARE AN EQUAL OPPORTUNITY EMPLOYER  We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status |

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| Position Applied For:  Foreman  Operator  Laborer Grade Checker  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | How Did You Learn About Us?  Advertisement  Friend  Relative  Employee  Walk-in  Website  Hiring Agency  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Applicant Information**

|  |  |  |  |
| --- | --- | --- | --- |
| Last Name | First Name | | Middle Initial |
| Address | | | Apt. |
| City | | State | Zip Code |
| Telephone | E-mail Address | | |

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| --- |
| Date available for Work \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Best time to contact you at home is: \_\_\_:\_\_\_\_ AM /PM  If you are under 18 years of age, can you provide required  Proof of your eligibility to work? □ Yes □ No  Have you ever filed an application with Koloa Pacific before? □ Yes □ No  If Yes, give date \_\_\_\_\_\_\_\_\_\_\_  Have you been employed by Koloa Pacific before? □ Yes □ No  If yes, give date \_\_\_\_\_\_\_\_\_\_\_\_ What position ­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Do any of your friends or relatives, other than spouse, work here? □ Yes □ No  If Yes, state name, relationship and location \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Are you currently employed? □ Yes □ No  May we contact your present employer? □ Yes □ No  What is your desired salary range? \_\_\_\_\_\_\_\_\_\_\_\_\_  Are you available to work: □ Full Time (Please Indicate 1 2 3 Shift)  □ Part Time (Please indicate Mornings Afternoon Evenings)  □ Temporary (Please indicate dates available \_\_\_\_\_\_\_\_ \* \_\_\_\_\_\_\_\_\_)  □ Overtime  Are you currently on “lay-off” status and subject to recall? □ Yes □ No  If yes, what company? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The Position you are applying for may require travel to different job site do  You have reliable transportation? □ Yes □ No  Are you available for out-of-town work? □ Yes □ No |

**Education**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School | Name and Address of School | Course of Study | Number of Years Completed | Diploma / Degree |
| High School |  |  |  |  |
| Undergraduate College |  |  |  |  |
| Graduate / Professional |  |  |  |  |
| Other / Specify |  |  |  |  |

**Work Experience**

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Dates Employed | From  \_\_\_\_/\_\_\_\_/\_\_\_\_\_ | To  \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| Address | Worked Preformed | | |
| Telephone Number(s) |  | | |
| Starting & Present Job Titles |  | | |
| Supervisor |  | | |
| Reason for Leaving |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Dates Employed | From  \_\_\_\_/\_\_\_\_/\_\_\_\_\_ | To  \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| Address | Worked Preformed | | |
| Telephone Number(s) |  | | |
| Starting & Present Job Titles |  | | |
| Supervisor |  | | |
| Reason for Leaving |  | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Employer | Dates Employed | From  \_\_\_\_/\_\_\_\_/\_\_\_\_\_ | To  \_\_\_\_/\_\_\_\_/\_\_\_\_ |
| Address | Worked Preformed | | |
| Telephone Number(s) |  | | |
| Starting & Present Job Titles |  | | |
| Supervisor |  | | |
| Reason for Leaving |  | | |

**Describe any gaps in employment.**

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**Describe any specialized training, apprenticeship, skills.**

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| DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.  Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the activities involved in the job or occupation for which you have applied?  **□ Yes □ No** |

**APPLICANT’S STATEMENT**

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| I certify that answers given herein are true and complete.  I authorize investigation of all statement’s contained it this application for employment as may be necessary in arriving at an employment decision.  I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the employee may resign at any time and the employer may discharge Employee at any time with or without cause.  In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. |

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| Signature of Applicant Date  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**FOR PERSONNEL DEPARTMENT USE ONLY**

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| Remarks: | |
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| Employed □ Yes □ No | Date of Employment \_\_\_\_/\_\_\_\_/\_\_\_\_  Rate of Pay $\_\_\_\_\_\_\_\_\_\_ HR |
| Supervisor  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name and Title Date | |