

AN EQUAL OPPORTUNITY EMPLOYER

The County of Kauai does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services

| <p>COUNTY OF KAUAI PARKS & RECREATION 4444 Rice Street, Suite 105 Lihue, Kauai, Hawaii 96766 Telephone (808) 241-4462 Fax 241-5126</p> | <p align="center">APPLICATION FOR EMPLOYMENT FOR:</p> <p align="center"> <input type="checkbox"/> Seasonal Site Manager <input type="checkbox"/> Seasonal Recreation Aide <input type="checkbox"/> <input type="checkbox"/> </p> | | | | | | | | | | | | | | | | |
|--|--|--|--|-----------------------|--------------------------|--|--|------|-------|----------|--------------------------|--|--|--------------------------------------|--|--|--|
| <p align="center">INSTRUCTIONS</p> <p>Type or Print Fill out application carefully. Failure to properly complete this application may result in your disqualification.</p> <p>CITIZENSHIP: Check the appropriate line below. (Note: Applicants must be citizens, nationals or permanent resident aliens of the United States)</p> <p>A <input type="checkbox"/> Citizen of the U.S. B <input type="checkbox"/> National of the U.S. C <input type="checkbox"/> Permanent Resident Alien of the U.S. D <input type="checkbox"/> Other _____ and are you authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>NAME AND MAILING ADDRESS:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">LAST</td> <td style="width:33%;">FIRST</td> <td style="width:33%;">M.I.</td> </tr> <tr> <td colspan="3">Street (Mailing Address)</td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td colspan="3">TELEPHONE: Business Home</td> </tr> <tr> <td colspan="3">SOCIAL SECURITY NUMBER: _____</td> </tr> </table> | LAST | FIRST | M.I. | Street (Mailing Address) | | | City | State | Zip Code | TELEPHONE: Business Home | | | SOCIAL SECURITY NUMBER: _____ | | | |
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| Street (Mailing Address) | | | | | | | | | | | | | | | | | |
| City | State | Zip Code | | | | | | | | | | | | | | | |
| TELEPHONE: Business Home | | | | | | | | | | | | | | | | | |
| SOCIAL SECURITY NUMBER: _____ | | | | | | | | | | | | | | | | | |
| <p>RESIDENCY: Are you a legal resident of the State of Hawaii? Yes <input type="checkbox"/> No <input type="checkbox"/> Date your legal residence in Hawaii began? _____</p> | | | | | | | | | | | | | | | | | |
| <p>EDUCATION AND SPECIAL TRAINING: When verification is required as indicated in our recruitment announcement, please submit proof or evidence of having completed the course(s) of study. Failure to do so may result in your application not being accepted.</p> | | | | | | | | | | | | | | | | | |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name and location of last grade school attended: (elementary, intermediate, high school)</td> <td style="width:30%;">Please indicate highest grade completed:</td> </tr> </table> | | Name and location of last grade school attended: (elementary, intermediate, high school) | Please indicate highest grade completed: | | | | | | | | | | | | | | |
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| <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%;">Business, Trade, College or University Name of School Address (City, State)</th> <th style="width:15%;">Major Course of Study</th> <th style="width:15%;">Graduated Yes / No</th> <th style="width:20%;">Degree or Cert.</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table> | | Business, Trade, College or University Name of School Address (City, State) | Major Course of Study | Graduated Yes / No | Degree or Cert. | | | | | | | | | | | | |
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| <p>EXPERIENCE: ATTACH ADDITIONAL SHEET(S) IF NECESSARY. Employer Name and Address: _____ Your title and duties: _____ _____</p> | | | | | | | | | | | | | | | | | |
| <p>Dates: From _____ To _____ F/T <input type="checkbox"/> P/T <input type="checkbox"/> Average hours worked per week _____</p> | | | | | | | | | | | | | | | | | |
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| <p>I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE; I ALSO UNDERSTAND THAT IF SELECTED FOR EMPLOYMENT, I AM REQUIRED TO PASS A DRUG SCREENING TEST AND/OR SUCCESSFULLY COMPLETE A FINGERPRINTING AND CRIMINAL HISTORY RECORD CHECK.</p> <p align="center"> _____ Date Signature </p> | | | | | | | | | | | | | | | | | |