

STATE OF HAWAI'I
Application for Non-Competitive Appointment

Please type or print in ink.

JOB TITLE _____ **POSITION NO.** _____

Name _____ **Soc. Sec. No.** _____
Last Name First Name Middle Initial

Address _____ **Phone No.** _____
Number Street Apt. # Home

City Island Zip Code Business

Be complete and accurate. An incomplete application may be cause for disqualification. False answers may be grounds for disqualification or dismissal. The information you provide will be used to determine whether you meet the minimum qualification requirements specified in the recruitment announcement.

Federal laws (Title VII of the Civil Rights Act of 1964, the Civil Rights Act of 1991, and the Americans with Disabilities Act) prohibit employers from discriminating on the basis of race, color, religion, sex, national origin, or disability. The Age Discrimination in Employment Act prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age. Chapter 378, H.R.S., prohibits employers from discriminating on the basis of race, sex, sexual orientation, age, religion, color, ancestry, disability, marital status, or arrest and court record except where it is a bona fide occupational qualification. The federal and state laws apply to all forms of employment decisions and actions, including pre-employment inquiries. The State of Hawai'i is an equal opportunity employer and complies with applicable state and federal laws relating to employment practices.

Education and Training

Name and location of Last Grade School Attended (elementary, intermediate, or high school) Highest Grade Year _____
Completed _____ Graduated _____

List other training beyond high school including business, trade, armed forces, college or university and graduate or professional schools.

When verification is required, please submit proof or evidence of having completed the course(s) of study.

Name and Location of School	Course or Major Field of Study	Credit Hrs. Semester	Completed Quarter	Kind of Degree, Diploma or Certificate Received	Date Received

Licenses List any licenses, registrations, or certificates that you possess which are pertinent to this job. Please present when filing your application or submit a copy with your application. Also list Hawai'i State driver's license number.

<u>Type</u>	<u>License/Registration No.</u>	<u>Date First Issued</u>	<u>Expiration Date</u>

Language Skills Other than English, list the language(s) you can speak, read, and/or write. After each language, indicate with the proper letter(s) if you are able to (S) speak, (R) read, or (W) write.

Special Qualifications List membership in professional or scientific societies, honors, awards, fellowship, publications, etc. Please do not submit copies unless requested to do so.

For Personnel Use Only:

Permanent Employee Yes No Accept _____

Last Performance Reject _____

Appraisal Satisfactory Yes No _____

Last N/C Promotion _____

The State is an equal opportunity employer.