**APPLICATION FOR EMPLOYMENT **

Maui Maui Kids Play Island does not discriminate on the basis of race, religion, national origin, color, sex, age, or disabilities. We are an equal opportunity employer and it is our best intention that all applicants are given the equal opportunity for employment at Maui Maui Kids Play Adventure Island. Hiring selection is based on an individual’s abilities to perform job related duties and follow company policies. Applicants requiring reasonable accommodations to the application and/or interview process should contact a member of management to coordinate accordingly.

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| **Applicant Name (first, last):** | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **Date:** | | | | | | |  | | | | | | | | | |
| Home Address: | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | |
| City: |  | | | | | | | | | | | | | | | | | State: | | | | | |  | | | | | | | | | | | | | | | | | | Zip: | | | | | |  | | | | | | | | | |
| Telephone Number: | | | | |  | | | | | | | | | | | | | | | | | | Social Security Number: | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |
| Are you over 18yrs old? | | | | | | | |  | | | Yes | | |  | | | No | | | Date of Birth (if under 18yrs): | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| If you are under 18, can you furnish a work permit if it is required? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | Yes | | | | |  | | | No | | |
| If hired, can you submit proof of eligibility to work in the United States? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | Yes | | | | | |  | | | | No | | |  | |
|  | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
| Position(s) applying for: | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
| Type of employment desired: | | | | | | | | | | | | | □ Full-time □ Part-time □ temporary/seasonal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| Date you are able to start work: | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
| **Shift Times you are able to work:** | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
| Mon: | |  | | | | | Tues: | | | | |  | | | | | | | | | | Weds: | | | | |  | | | | | | | | | | | | | | Thurs: | | | | | | | | |  | | | | | | | |
| Fri: | |  | | | | | | | | | | Sat: | | | |  | | | | | |  | | | | |  | | | | Sun: | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| Have you ever worked for this company before? | | | | | | | | | | | | | | | | | | | | |  | | | | Yes | | | |  | | | | | | No | | | | | | | |  | | |  | | | | | | | | | | | |
| If yes, when? | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
| Have you ever been involuntarily terminated from a job? | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Yes | | | | | |  | | | | | | | No | | | | | | | | | | | | | | |
| If yes, please explain: | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
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| Have you ever plead ‘guilty’, ‘no contest’, or been convicted of a crime? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | Yes | | | | | |  | | | No | | | |
| If yes, give dates and details (a conviction will not automatically bar employment): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | |
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| Driver’s license number, if applicable to the position: | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | State: | | | | | | | |  | | | | | | | | | |
| Do you have reliable transportation? | | | | | | | | | | | | | | |  | | | Yes | | | | | | | | | |  | | | | No | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Education:** | | | | | | **School Name** | | | | | | | | | | | | **Location** | | | | | | | | | | | | | | | **No. Years** | | | | | | | | | | | | | | | | **Degree Earned** | | | | | | | | |
| High School | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | |
| College | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | |
| Technical/Vocational | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | |
| Other | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  | | | | | | | | |
| **Summarize your special skills or qualifications:** | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |  | | | | | | | | | |
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**PREVIOUS EMPLOYMENT** (Identify past 10 years of work experience beginning with the most recent, continue on additional page if necessary)

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| Dates of Employment: | | | | | From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ | | | | | | | | | | | Position: | | | |  | |
| Company Name: | |  | | | | |  | | | | | | | Phone: | | | |  | | | |
| Address: |  | | | | | | | | | City/State/Zip: | | | | |  | | | |  | | |
| Supervisor and title: | | | |  | | | | | Starting Pay: | | |  | | | | | | Ending Pay: | | |  |
| Job Responsibilities: | | | |  | | |  | | | | | | | | |  | | |  | | |
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| Reason for Leaving: | | |  | | | |  | | | | | | | | |  | | |  | | |
| May we contact this employer for a reference? | | | | | | | |  | | | Yes | |  | | | | No | | | | |

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| Dates of Employment: | | | | | From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ | | | | | | | | | | | Position: | | | |  | |
| Company Name: | |  | | | | |  | | | | | | | Phone: | | | |  | | | |
| Address: |  | | | | | | | | | City/State/Zip: | | | | |  | | | |  | | |
| Supervisor and title: | | | |  | | | | | Starting Pay: | | |  | | | | | | Ending Pay: | | |  |
| Job Responsibilities: | | | |  | | |  | | | | | | | | |  | | |  | | |
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| Reason for Leaving: | | |  | | | |  | | | | | | | | |  | | |  | | |
| May we contact this employer for a reference? | | | | | | | |  | | | Yes | |  | | | | No | | | | |

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| Dates of Employment: | | | | | From \_\_\_\_/\_\_\_\_/\_\_\_\_ To \_\_\_\_/\_\_\_\_/\_\_\_\_ | | | | | | | | | | | Position: | | | |  | |
| Company Name: | |  | | | | |  | | | | | | | Phone: | | | |  | | | |
| Address: |  | | | | | | | | | City/State/Zip: | | | | |  | | | |  | | |
| Supervisor and title: | | | |  | | | | | Starting Pay: | | |  | | | | | | Ending Pay: | | |  |
| Job Responsibilities: | | | |  | | |  | | | | | | | | |  | | |  | | |
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| Reason for Leaving: | | |  | | | |  | | | | | | | | |  | | |  | | |
| May we contact this employer for a reference? | | | | | | | |  | | | Yes | |  | | | | No | | | | |
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*I certify that my answers are true and complete to the best of my knowledge. I authorize Maui Maui Kids Play Island to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision. I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.*

*In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in the termination of employment. I also understand I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.*

*If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.*

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_