



APPLICATION FOR CIVIL SERVICE POSITIONS

STATE RECRUITING OFFICE
Department of Human Resources Development
State of Hawaii

235 S. Beretania St., Room 1100, Honolulu, HI 96813-2437
 AN EQUAL OPPORTUNITY EMPLOYER

GENERAL INSTRUCTIONS: Please type or print legibly in ink.

The information you provide will be used to determine whether you qualify for the job(s) for which you are applying.

- Before applying, read the job requirements described in the Career Opportunity announcement carefully to determine if you qualify for the job.
- Any additional required forms described in the Career Opportunity announcement can be obtained from this office.
- Answer the questions completely and accurately. Your application may be rejected if it is incomplete or you may be disqualified or dismissed from employment if you provide false information.
- You must notify this office in writing of any changes to your name, address, telephone number or availability information.
- We will not be responsible for any mail or correspondence which does not reach you.
- Your application and accompanying material are confidential and becomes our property. Please make your own copy of your application before submitting it.

The State of Hawaii is an equal opportunity employer and complies with applicable state and federal laws relating to employment practices.
The information on pages 1 and 2 will not be released to persons involved in the appointment process.

1. CITIZENSHIP STATUS. Check the appropriate block below:

- A. Citizen of the U.S.
 - B. National of the U.S.
 - C. Permanent Resident Alien of the U.S.
 - D. Other - Non-citizen of the U.S.
- Are you authorized under federal law to work in the U.S.?
 Yes _____ No _____ Type of Visa _____

2. RESIDENCE STATUS. Check the appropriate block below:

Are you a legal resident of Hawaii? Yes No
 Month/Year legal Hawaii residence began. _____
 (NOTE: Public law requires most applicants to be legal residents of Hawaii. If you are in doubt about your status, complete and submit Form 319 with this application.)

**3. UNITED STATES MILITARY SERVICE
 Veterans Preference**

I claim 5 points 10 points (preference)
 Serial or Service No.: _____
 Date Entered Service: _____
 Date Separated Service: _____
 Type of last Separation: Honorable
 Other than Honorable

5 points veterans preference may be awarded to honorably separated veterans who served on active duty in the U.S. Armed Forces:

- A. During the period December 7, 1941 to July 1, 1955;
- B. For more than 180 consecutive days from January 31, 1955 through October 14, 1976 (Not including initial active duty for training under Reserve or National Guard programs);
- C. In a campaign or expedition for which a campaign badge or service medal was authorized.

10 points veterans preference may be awarded to:

- A. Honorably separated veterans with service-connected disability, including those awarded the Purple Heart;
- B. The spouse of an honorably separated veteran with a service-connected disability which disqualifies the veteran for State positions in his/her usual occupation;
- C. An unmarried, surviving spouse of a person who died while on active duty, or of an honorably separated veteran who served during the periods cited above.

To receive 5 points, you must submit a copy of your DD-214 showing dates of honorable service with this application. To receive 10 points, you must submit an official statement from the Veterans Administration or armed service dated within the past 12 months which confirms your qualification to receive 10 points preference. Spouses or widows must also submit evidence of marriage, and, as applicable, veteran's death.

Use this form for job(s) listed on the enclosed Career Opportunity announcement. Use a separate form when applying for job(s) listed on other Career Opportunity announcement(s).

4. _____
 JOB TITLE(S)

5. _____
 RECRUITMENT NUMBER(S)

6. NAME: _____
First Middle Last

7. ADDRESS: _____
Number or P.O. Box Street

_____ City Island or State Zip Code

8. PHONE NO.: _____
Business Home

9. SOCIAL SECURITY NUMBER: _____

10. CERTIFICATE OF APPLICANT

I hereby certify that all statements in this application are true and correct to the best of my knowledge, and I agree and understand that any misstatements of material facts herein may cause forfeiture of all rights to any employment in the service of the State of Hawaii.

Date _____ Signature of Applicant _____

		RS	CS	WT	WS
ID. No.	W.T.				
	O.I.				
	T.&E.				
	P.T.				
	Acc.				VP
	Rej.				FS

APPLICATION FOR CIVIL SERVICE POSITIONS

1. RECRUITMENT NO(S) _____ 2. JOB TITLE(S) _____

The information you provide will be used to determine whether you meet public employment requirements and the minimum qualification requirements specified in the Career Opportunity 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 Hawaii is an equal opportunity employer and complies with applicable state and federal laws relating to employment practices.

3. NAME: _____
First Middle Last

Other names used (including maiden name) _____

MAILING
 4. ADDRESS: _____

Number or P.O. Box Street

City Island or State Zip Code

5. PHONE NO.: _____
Business Home

6. SOCIAL SECURITY NUMBER: _____

7. EDUCATION: When verification is required as indicated in the "Career Opportunity" announcement, required documentation must be submitted at the time of application. If not, you may not receive credit for the training and/or your application may be considered incomplete and rejected. The information you provide in this section will be used strictly in the evaluation of your qualifications for the job(s) for which you are applying.

A. Name and location of last grade school attended: (elementary, intermediate or high school)

Highest Grade Level Completed:

Date of Graduation

DO NOT WRITE IN THIS SPACE

B. In-Service Training, Business, Trade, Armed Forces, College or University, Graduate or Professional Schools

NAME & ADDRESS	Course or Major Field of Study	Number of Credits or Hours Completed		Kind of Degree, Diploma or Certificate Received	Date Received
		Sem'tr	Quarter		

8. OTHER QUALIFICATIONS

A. LICENSE OR CERTIFICATE: Please indicate the kind, registration number, and the State or other licensing authority. *If proof or evidence is required as indicated in the "Career Opportunity" recruitment and examination announcement, please submit a copy or present for verification.*

B. KNOWLEDGE OF LANGUAGE OTHER THAN ENGLISH. List the language and check the appropriate block(s). Some positions require the ability to speak, read, and/or write in a language other than English.

LANGUAGE	SPEAK	READ	WRITE

C. SPECIAL QUALIFICATIONS. Include membership in professional or scientific societies, honors, awards, fellowships, publications (list but do not submit unless requested), etc.

