



Kealakekua Ranch, Ltd.  **ChoicemART**
a Division of Kealakekua Ranch, Ltd.

Kealakekua Ranch Center

APPLICATION FOR EMPLOYMENT

**This application for employment is good for sixty (60) days only.
Consideration for employment after 60 days requires a new application.**

82-6066 Mamalahoa Highway * P.O. Box 399, Captain Cook, HI 96704
Ph: (808) 323-3025 ext. 27 * Fax: (808) 323-3335 * E-mail: awatanabe@kealakekuaranch.com

Kealakekua Ranch, Ltd. is an equal opportunity employer. All applicants will receive consideration for positions which they are qualified for, without regard to race, color, sex, except where sex is a bona fide occupational qualification, age, religion, ancestry or national origin, disability, marital status, arrest and court record, sexual orientation, military or veteran status and/or other grounds protected under state and federal equal opportunity laws.

Please let us know if you have any questions about the employment application, the application process, or if you require assistance in completing the application for employment.

Name: _____ **Date:** _____

Address: _____

Primary Phone: () _____ **Alternate Phone:** () _____

E-mail Address: _____

Position applying for? _____

If you have been provided with a copy of the position description, can you perform the essential functions of the position for which you are applying, with or without a reasonable accommodation?
YES [] NO []

If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question)

Are you legally eligible to be employed in the United States? YES [] NO []

Are you at least 18 years or older? YES [] NO []

Have you ever worked for this Company before? YES [] NO []

If yes, when? (Give dates) _____ Job Title: _____

How did you hear about us? Walk In [] Advertisement [] Referral [] Other []

Do you know anyone who works here? YES [] NO [] If yes, who? _____

Are you looking for: PART TIME [] FULL TIME []



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Please check the appropriate boxes for your work availability:

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

EDUCATION:

	Name and Location of School	Course of Study	Did you graduate?	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

List academic honors, extracurricular activities, offices held, etc. in high school or college (Please omit any which may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, sexual orientation, military or veteran status or any other protected status.)

Have you completed any special courses, seminars and/or training that would enable you to perform the position for which you are applying? YES [] NO [] If yes, please describe:

Do you have any special skills or experience that would enhance your ability to perform the position applied for? YES [] NO [] If yes, please explain:

If you're presently employed, why are you considering leaving? _____



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Employment History Please include your last ten (10) years of employment history, starting with the most recent and working backwards in time. Incomplete information could disqualify you from further consideration.

Company Name:		Position:	
Full Address (Including Street, City, State & Zip)		Job Duties:	
Phone:			
From Month/Day/Year	To Month/Day/Year	Rate of Pay	Supervisor's Name / Title
Reason for Leaving:			
Company Name:		Position:	
Full Address (Including Street, City, State & Zip)		Job Duties:	
Phone:			
From Month/Day/Year	To Month/Day/Year	Rate of Pay	Supervisor's Name / Title
Reason for Leaving:			
Company Name:		Position:	
Full Address (Including Street, City, State & Zip)		Job Duties:	
Phone:			
From Month/Day/Year	To Month/Day/Year	Rate of Pay	Supervisor's Name / Title
Reason for Leaving:			
Company Name:		Position:	
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Phone:			
From Month/Day/Year	To Month/Day/Year	Rate of Pay	Supervisor's Name / Title
Reason for Leaving:			



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Professional References

Name		Occupation	
Full Address (Including Street, City, State & Zip)		Telephone Number ()	
Name		Occupation	
Full Address (Including Street, City, State & Zip)		Telephone Number ()	
Name		Occupation	
Full Address (Including Street, City, State & Zip)		Telephone Number ()	

NOTIFICATION & AGREEMENT - PLEASE READ CAREFULLY BEFORE SIGNING

Questions regarding this statement should be directed to any employment interviewer or the Human Resources department prior to signing.

I **attest** with my signature below that I have given to Kealakekua Ranch, Ltd. true and complete information on this application. No requested information has been concealed. I **authorize** Kealakekua Ranch, Ltd. to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

I **understand** that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Kealakekua Ranch, Ltd. to hire me.

In consideration of my employment, if hired, I agree to abide by all of the company rules and regulations and to conform to the policies and procedures of the company. I **understand** that in accepting this application, the company is in no way obligated to provide me with employment, and that I am not obligated to accept employment if offered. I understand that Kealakekua Ranch, Ltd. and all Plan Administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without cause, and with or without notice at any time. I understand that no representative of Kealakekua Ranch, Ltd. has the authority to make any assurance to the contrary.



If employed, I **agree** to engage in no outside activity which would involve a material conflict of interest with, or which could reflect adversely on Kealakekua Ranch, Ltd. I understand that the final decision will rest with the company. If employed, I agree to hold in strictest confidence any information concerning Kealakekua Ranch, Ltd., its Insured's and its Agents which may come to my knowledge.

I **consent** to and **authorize** Kealakekua Ranch, Ltd. to contact any and all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts, military services to release information about my background including, but not limited to, information about employment, education, consumer credit history, driving record, criminal record and general public records history to Kealakekua Ranch, Ltd.

I **release** from all liability all persons, companies, schools supplying such information. I indemnify Kealakekua Ranch, Ltd. against any liability, which may result from making such requests. This release shall remain in effect for the length of my employment. I understand and I may have a right to request additional disclosures regarding the nature and scope of the investigation. I also understand that I will be given a copy of the consumer report and a written description of my rights under the Fair Credit Reporting Act.

I **understand and agree** that as a condition of employment and as a part of my application for employment, I **will be required to submit to drug testing** and may be required to complete a post offer medical examination. I **will be required to submit to random drug testing as determined by the company**. In the event of a work related injury I will be required to submit to a mandatory drug test. I also understand and agree that I may be required to submit to a complete medical examination during my employment with Kealakekua Ranch, Ltd., provided such examination is job related and consistent with business necessity. The cost of drug testing and medical examination will be paid by the company. I authorize the physician conducting the examination and any laboratory testing any specimen obtained by the physician or collection site to disclose the results of the examination and the laboratory test to Kealakekua Ranch, Ltd. in accordance with State and Federal laws. The company will keep results confidential and disclose the results only to persons who need to know, or where required by law.

I **agree** to fully cooperate and provide Kealakekua Ranch, Ltd. with any additional consent(s) and/or release(s) as required by the company to process my employment application.

I **understand and agree** that all of the foregoing terms and conditions will become part of my employment relationship with Kealakekua Ranch, Ltd. if I am employed.

I **understand** that failure to reveal any prior employer, or giving false or misleading information by me on any part of this Application for Employment can be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice. I believe to the best of my knowledge that all information I have provided is accurate, true and correct and that I fully understand the terms of this release.

(Signature)

(Date)