

Hawaii Job Challenge Application

Personal Information

Last Name: _____ First: _____ Middle Initial: _____

Age: _____ Birthdate: _____ ☐ Male, ☐ Female SS#: XXX-XX-_____

Race/Ethnicity:

☐ African American/Black ☐ American Indian or Alaskan Native ☐ Asian ☐ Hispanic or Latino
☐ Native Hawaiian or Pacific Islander ☐ White/Caucasian ☐ Multi-Racial

Have you ever attended or worked at an educational institution under a different name? ☐ Yes ☐ No

If yes, provide other name(s): _____

Home Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Which of the following best describes your current housing status? ☐ Stable ☐ Temporary ☐ Homeless

Personal Cell Phone: _____ Home Phone: _____

Facebook Name: _____ Email address: _____

If under 18 years old: Parent/Guardians full name: _____

Parent/Guardians contact number: _____

Preferred contact methods: ☐ Call, ☐ Text, ☐ Email, ☐ Facebook (name _____)

Have you ever served in the military? ☐ Yes ☐ No

Is any member of your immediate family an active or retired military member? ☐ Yes ☐ No

Do you have any relatives or significant others employed by Hawaii Job Challenge Program or Hawaii Youth Challenge Academy? ☐ Yes ☐ No

Would you bring a cell phone to the program? ☐ Yes ☐ No

Do you have a valid driver's license? ☐ Yes ☐ No

Are you interested in getting your Drivers Permit (under 18)? ☐ Yes ☐ No

Are you interested in getting your Driver's License (18 and over)? ☐ Yes ☐ No

Health & Wellness:

Do you have health insurance (Must have)? ☐ Yes ☐ No

Do you have a medical insurance card? ☐ Yes ☐ No

Do you have any health concerns? ☐ Yes ☐ No

If yes, please explain: _____

Have you ever been admitted to a psychiatric hospital? ☐Yes ☐No
 Have you undergone a psychological evaluation in the past three years? ☐Yes ☐No
 Do you have any children? ☐Yes ☐No
 Do you have any siblings? ☐Yes ☐No
 Have you ever been adopted, in Foster Care or involved with DHS? ☐Yes ☐No

If yes, please explain and include the date(s): _____

Uniform Sizes:

Shirt Size:

☐ XS, ☐ S, ☐ M, ☐ L, ☐ XL, ☐ 2XL, ☐ 3XL, ☐ 4XL, ☐ 5XL, Other: _____

Pant Waist Size: ☐ XS (24-26) ☐ S (28-30) ☐ M (32-34) ☐ L (36-38) ☐ XL (40-42), ☐ 2XL (44-46), ☐ 3XL (48-50),
☐ 4XL (52-54), ☐ 5XL (56-58), Other: _____

Pant Length: ☐ Short (Inseam 30"), ☐ Regular (32") ☐ Long (34"), Other: _____

Shoe Size in Women's or Men's: Women: _____ or Men: _____ (Include if it's Wide or Extra Wide)

Education:

What year did you graduate from Youth Challenge Academy? _____ What was the cycle #? _____

Which Campus (Hilo or Kalaeloa)? _____

If you have taken the ASVAB test, what was your highest score? _____ Last date you took test? _____

Do you have a high school diploma? ☐Yes ☐No Are you pursuing a diploma? ☐Yes ☐No

Do you have a HiSET? ☐Yes ☐No Are you pursuing a HiSET? ☐Yes ☐No

If pursuing a HiSET, what sections have you passed? ☐Math ☐Language ☐Science ☐Social Studies

What was your Score for each? Math _____ Language _____ Science _____ Social Studies _____

Individualized Education Program (IEP): ☐Yes ☐No

Please Choose one Primary pathway and write **1st**, and then choose at least 2 Secondary Pathways and write **2nd and 3rd**

PRIMARY PATHWAYS			SECONDARY PATHWAY	
Aesthetic Medical Assistant		Diesel Mechanic		Small Engine Repair
Automotive Repair Technician		Heavy Truck Maintenance		Forklift Operating
Barber		Hospitality & Tourism Courses		UAV Drone Course
Body Sculpting		Medical Administrative Assistant		
Child Care Professional		Medical Billing & Coding		
Certified Nursing Assistant (CNA)		Permanent Makeup		
Computing Technology Industry Association		Phlebotomy Technician		
Construction		Plumbing		
Diesel Mechanic		HVACR		
Facial Course		Towing		
		Wedding Event Planner		

Employment:

Provide details of your employment history below: (You may substitute an attached resume)

Company	City	Begin Date	End Date	Salary	Reason for Leaving

If not a U.S. Citizen, can you provide verification of your legal right to work in the U.S.? ☐ Yes ☐ No

Have you ever been disciplined, suspended, or discharged from a position? ☐ Yes ☐ No

If yes, please explain each incident: _____

Legal/Court Involvement:

Have you ever been convicted of a felony ☐ Yes ☐ No, or a misdemeanor? ☐ Yes ☐ No

Do you have any misdemeanor or felony charges pending (including delayed sentence, suspended sentence, or diversion program)? ☐ Yes ☐ No

Have you ever been involved in any court action or in a courthouse for any reason? ☐ Yes ☐ No

Have you ever been arrested/handcuffed/detained by a police officer for any reason? ☐ Yes ☐ No

Have you ever had anything expunged from your record? ☐ Yes ☐ No

Have you ever been expelled or removed from school grounds by authorities? ☐ Yes ☐ No

If you answered yes to any of the above Legal/Court Involvement questions, please explain each incident:

(Answering yes does not eliminate your eligibility for the Job Challenge Program)

Legal/Court Involvement (continued...)

Are you or were you ever on probation, a consent calendar, or in the HYTA Program? ☐ Yes ☐ No

If yes to the above, please provide the following:

Probation Officer's Name: _____

Probation Officer's Phone : _____

State and County of Conviction/Arrest: _____

Date of Arrest: _____

Specific Charges: _____

Date of Release from Probation or Projected Date: _____

Community Service Hours Levied/Performed: _____

Terms and Conditions of Acceptance

I hereby consent to having a physical examination or test(s) conducted by Hawaii Job Challenge Program designee, including but not limited to, drug and/or alcohol testing, and understand that any refusal requires automatic dismissal. Any offer of acceptance is contingent upon the results of this examination(s) and/or test(s).

If I am accepted, I understand that additional personal data will be required for determination of eligibility and for statistical purposes.

I will abide by all policies, rules, and regulations, as amended from time to time, of the Hawaii Job Challenge Program, in my application and in the other materials I have submitted are true and complete. I understand that any false, misleading, or incomplete information could result in disqualification from the Hawaii Job Challenge Program if an offer has been made and accepted.

Printed Name of Applicant: _____ Date: _____

Signature: _____

Printed Name of Parent/Guardian: _____

Signature: _____

(If Applicant is under 18)

By signing, you give permission for the Hawaii Job Challenge Program to conduct an background check on the applicant listed above.

Parent/Guardian/18-year-old signature

Date

Printed name and relationship to applicant: _____