

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 (username _____)

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: _____

HAWAII JOB CHALLENGE APPLICATION

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

Short Size: ☐ XS | ☐ S | ☐ M | ☐ L | ☐ XL | ☐ 2XL | ☐ 3XL | ☐ 4XL | ☐ 5XL | Other: _____

Shoe Size: Women _____

Shoe Size: Men _____

Education:

What year did you graduate from Youth Challenge Academy? _____

What cycle or class #? _____

Which Campus (Hilo or Kalaeloa)? _____

Have you taken the ASVAB? 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

HAWAII JOB CHALLENGE APPLICATION

Please list your top (3) pathway choices starting with your primary as (1) followed by your 2nd and 3rd choice.

PRIMARY PATHWAYS	PRIMARY PATHWAYS (CONTINUED)	SECONDARY PATHWAYS
Body Sculpting Permanent Makeup Facial Aesthetic Medical Assistant Barber	Certified Nurse Aid (CNA) Phlebotomy Technician Medical Billing & Coding Medical Administrative Assistant	Fitness & Nutrition (certificate) Gourmet Cooking (certificate) Small Engine Repair (certificate) Forklift Operator UAV Drone
Construction Plumber *HVACR Technician *Diesel Mechanics/Heavy Truck Maintenance *Automotive Repair Technician Towing	Hotel & Restaurant Management *Event Planner *Interior Decorator *IT Support Specialist CompTIA A+ Security+ Network+ *Veterinary Assistant *Child Care Professional	(*) INDICATES THAT THIS IS A CAREER DIPLOMA COURSE 1st Choice: 2nd Choice: 3rd Choice:

Employment:

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

Company	City	Start 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: _____

HAWAII JOB CHALLENGE APPLICATION

Legal/Court Involvement:

Have you ever been convicted of a felony 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)

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: _____



HAWAII JOB CHALLENGE APPLICATION

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: _____ Date: _____

Signature: _____

(If Applicant is under 18)

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

Parent/Guardian/18-year-old signature **Date**

Printed name and relationship to applicant: _____