

HI'IPAKA LLC

Date of Application: GENERAL INFORMATION NAME:	
ADDRESS: ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES NO ARE YOU EMPLOYED NOW? YES NO WHERE? IF SO, MAY WE INQUIRE WITH YOUR PRESENT EMPLOYER? YES NO HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? WHERE? WHEN? HAVE YOU EVER BEEN EMPLOYED BY THIS COMPANY BEFORE?	
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HAVE YOU EVER BEEN EMPLOYED BY THIS COMPANY BEFORE?	10
WHERE? WHEN?	
EMPLOYMENT DESIRED	
POSITION(S): 1	
2	
DATE YOU CAN START:	
B/(12 100 0/((01/((()))	
AVAILABILITY (DAYS AND HOURS AVAILABLE TO WORK)	
MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY SATURDAY SU	IINDAY
TIME	- CHDA1
ROM	
TME TO THE TO THE TOTAL TH	
TO	
ADE VOLLAVAILABLE TO WORK ON EVENINGS	
ARE YOU AVAILABLE TO WORK ON EVENINGS? YES NO	
HOLIDAYS? YES NO	



SKILLS

LIST ALL JOB RELATED CERTIFICATIONS AND SKILLS INCLUDING, IF APPLICABLE, ALL COMPUTER PROGRAMS/SOFTWARE YOU CURRENTLY USE:				
FOR WHICH YOU ARE APPLYI	I THE ESSENTIAL FUNCTIONS OF THE FING, WITH OR WITHOUT A REASONABLE O JOB DESCRIPTION BEFORE RESPONDING	E		
	EMPLOYED FROM:	TO:		
ADDRESS:				
	SUPERVISOR:			
REASON FOR LEAVING:				
EMPLOYER:	EMPLOYED FROM:	TO:		
ADDRESS:				
	 SUPERVISOR:			
EMPLOYER:	EMPLOYED FROM:	TO:		
ADDRESS:				
JOB TITLE:	SUPERVISOR:			
WORK PERFORMED:				
REASON FOR LEAVING:				



HI'IPAKA LLC

EDUCATION

Name of School	Location	Years Completed	Did You Graduate?	Degree(s)
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
OTHER				
CERTIFICATION (READ (I certify that all statements made knowledge. I understand and ag sufficient ground for cancellation "Company"), for immediate discipled to the company of the compan	I authorize the Company to contucational institutions listed, and to ication. I also authorize the Companinquiry into my criminal converceration), including state and feature and its representatives harmonests, acts or omissions in the continuous application.	Complete to the lor omission of material and obtain into investigate any pany, if I receive iction record for the deral checks, to the mless and release ourse and/or as a fill basis and that	pest of my terial fact is a LLC (the formation from of the above a conditional ne past ten he extent e them from a result of its	
DATE		SIGNATURE OF AF	PPLICANT	