HONOLULU COMMUNITY ACTION PROGRAM, INC.
HO‘OMAU KA ‘IKE NĀNĀ KE KŪPUNA EMPLOYMENT PROGRAM APPLICATION

NAME: ___________________________ SOCIAL SECURITY _____ / _____ / _____
                      Last    First     Middle Initial

ADDRESS: ___________________________ Home Phone ___________________________
                      Number   Street     Apt. No.

                      City       State      Zip Code

                      Cell Phone ___________________________

Are you a U.S. Citizen, American National, Permanent Resident Alien, Lawfully admitted refugee, or otherwise authorized by the U.S. Attorney General to work in the United States? _____YES _____NO

How did you hear of the Ho‘omau Ka ‘Ike Nānā Ke Kūpuna Employment Program?

_____Friend       _____Senior Center       _____Host Agency

_____State Employment Service       _____Advertisement/Poster       _____Other

Type of Job (s) I am Interested In ___________________________

_____I am over 55       _____I am over 60       Date of Birth: ___________________________

Have you applied to or been employed by HCAP before? _____YES _____NO

EDUCATION AND SPECIAL TRAINING:
Circle highest school grade completed: 1  2  3  4  5  6  7  8  9  10  11  12  GED

Graduated from High School _____YES _____NO

List below all High School, Colleges, and Universities, Business Schools or Vocational School training:

Name of School

Address

Courses

Diploma/Degree

LICENSSES:

DRIVER’S LICENSE _____YES _____NO _____ Type       Expiration Date ___________________________

Revised 01/2020
EXPERIENCE: Begin with most recent employer. Describe work personally performed by you.

COMPANY ______________________________ From ________ To ________
Address ______________________________ Full Time ______ Part Time ______
Salary/Wages __________________________ Name & Title of Supervisor ______
Your Title _____________________________ Duties (Include % of time) ______

Reason for Leaving: _______________________________________________________

COMPANY ______________________________ From ________ To ________
Address ______________________________ Full Time ______ Part Time ______
Salary/Wages __________________________ Name & Title of Supervisor ______
Your Title _____________________________ Duties (Include % of time) ______

Reason for Leaving: _______________________________________________________

COMPANY ______________________________ From ________ To ________
Address ______________________________ Full Time ______ Part Time ______
Salary/Wages __________________________ Name & Title of Supervisor ______
Your Title _____________________________ Duties (Include % of time) ______

Reason for Leaving: _______________________________________________________

COMMENTS:

CERTIFICATE OF APPLICANT: I HEREBY CERTIFY, that all statements made on or in connection with this application are true and correct, and I agree and understand that any misstatement or omission of material facts may cause forfeiture on my part of all rights to any Ho‘omau Ka ‘Ike Nānā Ke Kūpuna Employment Program benefit and services.

_________________________ _______________________
Signature of Applicant Date

NOTE: APPLICATIONS WILL BE HELD FOR 90 DAYS, AFTER THAT TIME APPLICANTS NEED TO SUBMIT A NEW APPLICATION FOR CONSIDERATION.

Revised 01/2020
Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program

Eligibility for the Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program requires that you are now and will remain actively seeking regular work.

You must continue to look for work if your application is to remain active with us. We must hear about your attempts to get job interviews and the status of your application if you expect us to continue to consider your application for Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program.

We judge your appropriateness for Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program based on your efforts to look for work and the response you make to job leads that we give you. Starting now you will look for work:

1. BEFORE you enroll in Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program
2. While your Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program enrollment is PENDING and you are waiting to start a known assignment.
3. Once you have a Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program work site assignment, YOU MUST CONTINUE LOOKING FOR A BETTER JOB or lose your assignment to someone who is more likely to be looking for work. You must be actively seeking regular work to remain eligible for Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program.

CONTRACT OF UNDERSTANDING REGARDING CONTINUALLY SEEKING WORK

I agree now and as long as I am associated with Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program to be actively seeking employment.

Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program Applicant

DATE

Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program Employment Counselor

DATE

We have new applicants almost every day. This is far more than we will be able to place. Keep looking for regular jobs at State Employment, Job Help and the classified ads in the Sunday newspaper.

Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program work sites are NOT volunteer positions, nor is the pay just a supplement to retirement; rather it is a step towards regular employment. You must keep looking for regular work.

The current hourly wage is $10.10 (minimum wage), from which taxes and Social Security will be deducted.

The Federal Government which supplies our funds, requires that Ho`omau Ka `Ike Nānā Ke Kūpuna Employment Program trainees continue looking for regular jobs. Even in our poor economy there are many better paying jobs, or jobs with more hours.