

Application for Employment

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AWAII-WESTERN MANAGEMENT GROUP, INC.			Today's Date:	
			Position you are applying for:	
ERSONAL INFORMAT	ION			
Name		Las	st Four Digits of Social Security Number	
Address (Street, City, State, an	d Zip Code)			
Phone Number	Alternate Phone Number, if any		Email Address	
MPLOYMENT RECOR	D - Starting with the most recent, list all cu	Irrent and previou	us employers. Use additional sheets if needed	
EMPLOYER		Dates Employed From (Month/Year): To (Month/Year):		
Address (Street, City, State, an	d Zip Code)			
Phone Number	Job 1	Title		
Primary Job Duties	I			
Supervisor	Reas	on For leaving		
EMPLOYER		s Employed (Month/Year):	To (Month/Year):	
Address (Street, City, State, an				
Phone Number	Job 7	Fitle		
Primary Job Duties				
Supervisor	Reas	son for leaving		
EMPLOYER		s Employed (Month/Year):	To (Month/Year):	

Phone Number	Job Title	
Primary Job Duties	· · · ·	

Supervisor	Reason for leaving	
EMPLOYER	Dates Employed	
	From (Month/Year):	To (Month/Year):
Address (Street, City, State, and Zip Code)		
Phone Number	Job Title	
Primary Job Duties		
Supervisor	Reason for leaving	

Address (Street, City, State, and Zip Code)

REFERENCES - List references who are not relatives or previous/current employers.

Name	Occupation
Address	Phone Number
Name	Occupation
Address	Phone Number

EDUCATION

Name of School	Address	Number of Years Attended	Degree, Diploma, or Certificate Received
High School			
Trade School or Other			
College			
Graduate School			

SKILLS / LICENSES - List your skills and/or licenses applicable to the job you are applying for.

Licenses/Certifications
Computer Skills/Programs
Other Equipment Skills (such as switchboard or mailroom equipment)

OTHER

What is your desired annual salary? \$	
Are you able to perform the essential functions of this job (refer to Job Description	n) without reasonable accommodation?
Yes No - please explain:	
Were you referred by anyone currently working for our company? \Box Yes \Box	No If Yes, who?

ACKNOWLEDGEMENT

I hereby understand and certify:

- All statements made on this application are true and to the best of my knowledge.
- My application will not be considered if it is incomplete or unsigned.
- Any misrepresentation or omission when discovered may subject me to discharge, and I hereby authorize investigation of any
 of the above information or related work experience, education, or reputation information for purposes of consideration of my
 application for employment.
- This application is not a contract and cannot create a contract.
- If I am employed, my employment is "at will" and can be terminated at any time, either by myself or the Company, with or without cause or reason, and with or without notice.
- All offers for employment are conditional upon employment verification responses and verification of my identity and legal right to work in the United States.

Signature: ____

Date: _____

HWMG is an equal opportunity employer. It is our policy to employ qualified people without regard to race, color, religion, sex, gender, pregnancy, national origin, age, ancestry, disability, sexual orientation, military/veteran's status, marital status, arrest or court record, citizenship, genetic information, gender identity or expression, domestic or sexual violence status, or other grounds protected under applicable federal and state laws, except as required or permitted by law.