

Kekahu Foundation, Inc. dba KKCR-FM, Kaua'i Community Radio

PO Box 825, Hanalei, HI. 96714 (808) 826-7774 • www.KKCR.org • gm@kkcr.org

APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY EMPLOYER - The Kekahu Foundation, Inc. is an equal opportunity employer. We celebrate diversity and are committed to creating an inclusive environment for all employees.

PERSONAL INFORMATION

Date:

Name:

Mailing Address:

Physical Address:

Phone: Email:

Social Security Number:

Do you currently live on Kaua'i? Yes No If yes, how long have you lived on Kaua'i?

Do you have dependable transportation? Yes No

Date Available to Start Employment:

POSITION APPLYING FOR: OFFICE ASSISTANT

Do you have a strong knowledge of Hawaiian music, culture and language? Yes No

Do you have a strong knowledge of Microsoft Office (outlook, excel, word)? Yes No

Excellent familiarity and knowledge of Community or Public Radio? Yes No

List qualifications / skills

Are you a citizen of the United States? Yes No

[Note: if offered employment you will be required to submit documentation required by IRCA.]

If no, are you authorized to work in the U.S.? Yes No

Have you ever worked for this company? Yes No

If yes, when:

Have you ever been convicted of a felony? Yes No

If yes, explain:

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EDUCATION

TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	NO. YEARS	MAJOR / DEGREE
High School	<input type="text"/>		
College	<input type="text"/>		
Other	<input type="text"/>		

REFERENCES

Please list three professional references (not family):

Name:	Address:	Phone:
1) <input type="text"/>	<input type="text"/>	<input type="text"/>
2) <input type="text"/>	<input type="text"/>	<input type="text"/>
3) <input type="text"/>	<input type="text"/>	<input type="text"/>

PREVIOUS EMPLOYMENT

List Last 3 Employers starting with most recent

1) Employer:

Supervisor Name & Contact Information:

Job Title: Salary/Wage:

Dates of Employment:

Reason for leaving:

2) Employer:

Supervisor Name & Contact Information:

Job Title: Salary/Wage:

Dates of Employment:

Reason for leaving:

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PREVIOUS EMPLOYMENT CONTINUED

2) Employer:

Supervisor Name & Contact Information:

Job Title: Salary/Wage:

Dates of Employment:

Reason for leaving:

IMPORTANT: PLEASE READ CAREFULLY BEFORE SIGNING

I understand, certify, and agree as follows:

- 1) I certify that my answers are accurate, completely true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release regardless of when such misrepresentation or omission is discovered
- 2) I hereby authorize the Kekahu Foundation, Inc. to make a thorough investigation into my background and to communicate with any of my prior employers, educational institutions, references, or other organizations to ascertain any pertinent facts or opinions regarding my prior employment, educational or background. I further authorize any and all of my prior employers to release to the Kekahu Foundation, Inc. any and all facts, opinions, or documents regarding prior employment. I release from all liability all persons or companies supplying such information, I further indemnify the Kekahu Foundation, Inc. against liability which might result in making such investigation into my background.
- 3) I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the Kekahu Foundation and myself. No promises or guarantees regarding employment or continuing employment have been made to me. If an employment relationship is established, I understand that my employment is an "at will" basis, and may be terminated at any time by me or the Kekahu Foundation with or without notice, without liability of any kind to the Kekahu Foundation or myself. I also agree that if hired, I may be subject to various employee policies and rules as set forth in the Employment Handbook. I understand and agree that the provisions of any such handbook are merely guidelines and not intended to be contractual. I also agree that such provisions may be changed at any time, with or without notice, in the complete discretion of the Kekahu Foundation, Inc.
- 4) I agree to all of the consents, authorizations and releases which I have made in this documents shall be irrevocable during the period of my employment should I be hire by the Kekahu Foundation, Inc.

By my signature below, I certify I have read this document completely and understand it fully or have obtained all necessary explanations from the Kekahu Foundation, Inc. before signing this acknowledgement.

Signature: Date:

OFFICE USE ONLY

NOTES

DATE RECEIVED:
INTERVIEW
SCHEDULED:
FINAL
DETERMINATION: