

APPLICATION FOR EMPLOYMENT



National Tropical Botanical Garden National Headquarters

3530 Papalina Road, Kalaheo, Kauai, Hawaii 96741
Phone: (808)332-7324 Fax: (808)332-9765 Website: www.ntbg.org

Visitor Center

4425 Lawai Beach Road, Koloa, Kauai, HI 96756

Kahanu Garden

P.O. Box 95 Hana, Maui, HI 96714

Limahuli Garden & Preserve

P.O. Box 808, Hanalei, Kauai, HI 96714

The Kampong

4013 Douglas Road, Coconut Grove, FL 33133

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

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|---|--|---------------------------|---|-------------------------------|--|
| 1. Date of Application: | | 2. Position Applying For: | | 3. Wage Desired: | |
| 4. Name (Last, First, Middle, Maiden): | | | | 5. Social Security Number: | |
| 6. Mailing Address: | | | | 7. Best Contact Phone Number: | |
| 8. Physical Address: | | | | Home: | |
| | | | | Cell: | |
| | | | | Work: | |
| 9. Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | 10. If you are under 18 and it is required, can you furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain: | | |
| 11. Have you submitted an application here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give date(s) and position(s): | | | | | |
| 12. Have you been employed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give date(s) and position(s): | | | 13. Will you relocate if job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| | | | 14. Will you travel if job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 15. Will you work overtime if required? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain: | | | 16. Do you have a Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No State: Type, if any: | | |
| 17. Have you entered into an agreement with any former employer or other party (such as a non-competition agreement) that might, in any way, restrict your ability to work for our company? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: | | | | | |
| 18. MILITARY | | | | | |
| Have you ever been in the armed forces? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Are you presently on active duty or a member of the National Guard? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |
| Date Entered: | | Discharge Date: | | Specialty: | |
| | | | | | |

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|---|--|
| 19. EMPLOYMENT HISTORY – Please start with your most recent employer | |
| 1. Employer: | Dates Employed: |
| Phone Number: | Month Year to Month Year |
| Street Address: | Starting Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Starting job title / final job title: | Ending Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Immediate supervisor and title (for most recent position held): | May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |
| Why did you leave? | |
| Summarize the type of work performed and job responsibilities: | |
| 2. Employer: | Dates Employed: |
| Phone Number: | Month Year to Month Year |
| Street Address: | Starting Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Starting job title / final job title: | Ending Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Immediate supervisor and title (for most recent position held): | May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |
| Why did you leave? | |
| Summarize the type of work performed and job responsibilities: | |
| 3. Employer: | Dates Employed: |
| Phone Number: | Month Year to Month Year |
| Street Address: | Starting Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Starting job title / final job title: | Ending Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Immediate supervisor and title (for most recent position held): | May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |
| Why did you leave? | |
| Summarize the type of work performed and job responsibilities: | |
| 4. Employer: | Dates Employed: |
| Phone Number: | Month Year to Month Year |
| Street Address: | Starting Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Starting job title / final job title: | Ending Salary: <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per |
| Immediate supervisor and title (for most recent position held): | May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |
| Why did you leave? | |
| Summarize the type of work performed and job responsibilities: | |
| If not addressed, have you ever been fired or asked to resign from a job: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain: | |
| 20. SKILLS AND QUALIFICATIONS | |
| Typing: <input type="checkbox"/> Yes, wpm <input type="checkbox"/> No | 10-Key Calculator: <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Computer Skills – Check appropriate boxes. Include software titles and years of experience. | |

| 20. SKILLS AND QUALIFICATIONS (continued) | | | | |
|---|----------------|---------------------|-----------------|----------------------|
| <input type="checkbox"/> Word Processing | Software: | Years: | | |
| <input type="checkbox"/> Spreadsheet | Software: | Years: | | |
| <input type="checkbox"/> Presentation | Software: | Years: | | |
| <input type="checkbox"/> E-mail | Software: | Years: | | |
| <input type="checkbox"/> Internet | Software: | Years: | | |
| <input type="checkbox"/> Other | Software: | Years: | | |
| Summarize any other special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying: | | | | |
| | | | | |
| 21. EDUCATION | | | | |
| Type of School | Name of School | Location & Address | Years Completed | Major & Degree |
| High School | | | | |
| College | | | | |
| Business or Trade School | | | | |
| Professional School | | | | |
| 22. REFERENCES – List name and telephone number of three business/work references that are <i>not</i> related to you and are <i>not</i> previous supervisors. If not applicable, list three school or personal references that are <i>not</i> related to you. | | | | |
| Name | Title | Relationship to You | Telephone | Number of Year Known |
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APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and the federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration from employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ **Date** ____/____/____

Please mail or fax completed application to National Tropical Botanical Garden, Attention: Human Resources