

EMPLOYMENT APPLICATION

DATE:

Applicant Information						
	Aj	oplicant Info	ormation			
Name:						
Address:						
City, State Zip Code:						
Phone Number:		Do you have a valid driver's license?* State/License #:		□Yes		□No
Have you ever applied to or worked for MSIW?	□Yes □No	If yes, when?				
Do you have any friends/relatives working for MSIW?	□Yes □No	If yes, state name and relationship:				
How did you hear about us/this opening?			·			
State briefly why you would like to work for Maui Soda & Ice Works, Ltd.						
	General Inform	ation about	Employment Desi	ired		
Position you are applying for:			Employment sta			
Are you available to work on weekends?*	□Yes	□No	Hours available work:	to		
If part-time, hours per week desired:			Are you available call?*	le on-	□Yes	□No
Are you available to work nights?*	□Yes	□No	Are you availabl work overtime?	le to	□Yes	□No
If hired, on what date could you start work?						
*if required for the position you are seeking						
Education and Training (include on-the-job training)						
	School/Location/	Sponsor (Course of Stud	ly	# of Year	rs Attended
High School						
Community College						
Trade School						
College/University						
Seminars/Other						



Reason for Leaving:

		Special Skills		
Do you have any experience, training, qualifications or skills which you feel make you especially suited to work at Maui Soda & Ice Works, Ltd.? If so, explain in detail below. Please include average operational time spent in				
operation of a Commer	cial Vehicle (CDL).			
Computer Sk	ills	Dates Used	Level of Proficiency	
T 11		Employment History		
	mployers starting wi	th your present or most re	cent position (last ten years is sufficient).	
Name of Company 1				
Address:				
Name of Supervisor:		Telephone Number:		
Start Date:		End Date:		
Position:		Duties:		
Reason for Leaving:		,		
Name of Company 2	********			
Address				
Name of Supervisor:		Telephone Number:		
Start Date:		End Date:		
Position:		Duties:		



Employment History (continued) List all previous employers starting with your present or most recent position (last ten years is sufficient).						
Name of Company 3		•		•	•	,
Address:						
Name of Supervisor:		Telep	hone Number:			
Start Date:		End D	Date:			
Position:		Dutie	s:			
Reason for Leaving:						
Name of Company 4					,,,,,,,,,,,,,	
Address:						
Name of Supervisor:		Telep	hone Number:			
Start Date:		End D	Date:			
Position:		Dutie	s:			
Reason for Leaving:						
Name of Company 5				, , , , , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. , , , , , , , , , , , , , , , , , , ,
Address:						
Name of Supervisor:		Telep	hone Number:			
Start Date:		End I	Date:			
Position:		Dutie	s:			
Reason for Leaving:						
References Give the names of three persons not related to you, whom you have known at least three (3) years.						
Name	Address, Phone, Email		Company		Years Acquainte	



Maui Soda and Ice Works, Ltd. is an Equal Opportunity Employer. Race, color, religion, age, sex, disability, marital or veteran status, place of national origin, and other categories protected by law are not factors in employment, promotion, compensation or working conditions.

<u>Please read and initial each paragraph below</u> (if there is any part of this page you do not understand, please ask the interviewer about it before signing).

	I hereby authorize Maui Soda & Ice Works, Ltd. to thoroughly investigate my reference other matters related to my suitability for employment and further authorize my cut to the company any and all letters, reports, and other information pertaining to my me prior notice of such disclosure. In addition, I hereby release Maui Soda & Ice we employers, and all other persons, corporations, partnerships, and associations from liabilities arising out of or in any way related to such investigation or disclosure.	employment with them without giving Works, Ltd., my current and former
	I understand that if offered employment, the offer may be contingent on my passir screen and a pre-employment physical. By signing this application, I voluntarily a alcohol/drug screen and pre-employment physical upon request. I understand that and/or physical will result in withdrawal of the employment offer.	gree to submit to a pre-employment
	If hired, I also agree to submit to alcohol or drug testing as a condition of employr Works, Ltd. may conduct alcohol or drug screening at its sole discretion with or w refusal to submit to an alcohol/drug screen will be considered a voluntary resignat	rithout notice. I also understand that
	I understand that if offered employment, Maui Soda & Ice Works, Ltd. may inquire conviction record that I may have after it makes a conditional offer of employment may withdraw a conditional employment offer if I have a criminal conviction record to the duties and responsibilities of the position for which I am applying. Any criminal than 10 years old or that involves certain Family Court matters will not be consider	t to me. Maui Soda & Ice Works, Ltd. ord which bears a rational relationship ninal conviction record that is more
	I understand that nothing contained in the application or conveyed to me during are intended to create an employment contract, implied or explicit, between me and M addition, I understand and agree that if I am employed, my employment relationsh is strictly voluntary and at our mutual will. I understand that if employed, my emp may be terminated at any time, with or without prior notice, with or without cause myself or Maui Soda & Ice Works, Ltd., and that no promises or representations c Maui Soda & Ice Works, Ltd. unless made in writing and signed jointly by the Presentations of the strength of th	laui Soda & Ice Works, Ltd In ip with Maui Soda & Ice Works, Ltd. loyment is for no definite period and or reason, at the option of either ontrary to the forgoing are binding on
	I understand and agree that any future changes in my title, duties, compensation, v & Ice Works, Ltd. benefits, policies, and procedures will not alter our will and arb	
	I understand that if offered employment, I will, as a condition of employment, be and legal right to work in the United States on my first day of employment.	required to submit proof of my identity
	If the position applied for requires driving in the course of work, I understand that and valid Hawai'i driver's license and understand that I will be required to provide and proof of insurance. I also understand that any offer of employment is continge Soda & Ice Works, Ltd. auto insurance, if required for my position.	e a copy of my official driving record
	I hereby certify that I have not knowingly withheld any information that might adversely employment and that the answers given by me are true and correct to the best of me the undersigned applicant, have personally completed this application. I understant this application or on any documents used to secure employment shall be grounds immediate discharge is I am employed, regardless of the time elapsed before discontinuation.	ny knowledge. I further certify that I, d that any omission or misstatement on for rejection of this application or for
	signature below certifies that I have read and understand this complete page ditions outlined in this document.	and agree to the terms and
——App	licant's Signature	Date