



Summer Academic Camp Independent Contractor Application

Last Name _____ First Name _____ Middle Initial _____

Address _____

City _____ State _____ Zip _____

Telephone Number (Home) _____ (Cellular) _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country? Yes No

Proof of citizenship or immigration status is required upon employment.

Availability: Please indicate which Camp session you are available to work.	
<input type="checkbox"/>	Session 1: June 11 through June 22, 2012
<input type="checkbox"/>	Session 2: June 25 through July 6, 2012

EDUCATION AND PROFESSIONAL TRAINING: Please list, in order of attendance, all educational institutions attended. All information must be completed.					
Name of Institution College or University	Location	Dates Attended	Degree	Degree Date	Major Subject

Hawaii Learning Resource is an Equal Opportunity Employer



1. Have you ever had your teaching certificate suspended, revoked, not renewed, or sanctioned from another state?

Yes No

2. Have you ever been suspended, dismissed or asked to resign from any teaching position?

Yes No

3. Have you ever been convicted of a felony or misdemeanor other than minor traffic violations?

Yes No

If answering “Yes” to any of the above, please attach a separate sheet with explanation. For #1 and #2, please also include photocopies of correspondence explaining the reason. For #3, please include photocopies of court documents describing the conviction, the court terms and conditions, and verification of completion of terms.

Applicants must also submit a letter of reference from their current principal.

PROFESSIONAL TEACHING EXPERIENCE: Please list only teaching and educational administrative experience. Start with your present or most recent position. You may submit verification of employment and reference reports/letters.		
School	Principal	Dates (Month/Year) From: To:
Address		Beginning Salary/Ending Salary
Grade/Subject	Title	Full Time <input type="checkbox"/> Part-time <input type="checkbox"/> Substitute <input type="checkbox"/>
Reason for Leaving		

School	Principal	Dates (Month/Year) From: To:
Address		Beginning Salary/Ending Salary
Grade/Subject	Title	Full Time <input type="checkbox"/> Part-time <input type="checkbox"/> Substitute <input type="checkbox"/>
Reason for Leaving		



School	Principal	Dates (Month/Year) From: To:
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Grade/Subject	Title	Full Time <input type="checkbox"/> Part-time <input type="checkbox"/> Substitute <input type="checkbox"/>
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School	Principal	Dates (Month/Year) From: To:
Address		Beginning Salary/Ending Salary
Grade/Subject	Title	Full Time <input type="checkbox"/> Part-time <input type="checkbox"/> Substitute <input type="checkbox"/>
Reason for Leaving		

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete. I understand this application is for consideration as an Independent Contractor and authorize Hawaii Learning Resource to investigate all statements contained in this application. As an Independent Contractor, I am not an employee or partner of Hawaii Learning Resource. As such, Hawaii Learning Resource shall not deduct withholding taxes, FICA, or any other taxes required by an employer as I acknowledge as an Independent Contractor it is my responsibility to pay these taxes. I also acknowledge that I am not entitled to any fringe benefits, pension, retirement, profit sharing, or any other benefits accruing to employees.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any contractor relationship with this organization is of an "at will" nature, which means that the contractor may resign at any time and Hawaii Learning Resource may discharge the contractor at any time with or without cause. It is further understood that this "at will" relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of a signed contract, I understand that false or misleading information given in my application or interview may result in the immediate cancellation of my contract.

Signature of Contractor Applicant

Date