Paepae o Heʻeia and Papahana Kuaola present:

**The Heʻeia Ahupuaʻa Internship**

Participant Application Form

**Attention Applicant:** You are required to submit a completed application form including contact information for three character references. It is preferred that answers be typed, but handwritten applications in ink will be accepted. Responses to essay questions may be attached on a separate sheet of paper. Submit this completed application to:

Paepae o Heʻeia  
ATTN: Heʻeia Ahupuaʻa Internship  
P.O. Box 6355  
Kaneʻohe, HI 96744

OR

VIA FAX: (808) 234-1999

You will be contacted via phone when your application is received.

**APPLICATIONS MUST BE POSTMARKED BY AUGUST 26, 2009!!!**

Before completing this application please understand that if selected you will be required to work from 8am-12pm on Monday, Tuesday, Thursday and Friday beginning September 14, 2009 and ending on December 12, 2009. If your schedule does not permit for you to work these 16 hours a week, you will not be able to participate in this internship.

By signing below you are verifying that you are available to work during the time frame and daily hours specified above.

________________________________________  _____________________
Signature                                Date
Paepae o He‘eia and Papahana Kuaola present:

**The He‘eia Ahupua‘a Internship**

Participant Application Form

Name: ________________________________________________

Mailing Address: ________________________________________________

Email Address: ________________________________________________

Street Address (if different): _______________________________________________

Home Telephone: _______________________________

Cellular Telephone: _______________________________

College/ University: _______________________________________________

Grade Level: _______________________________

Age: _______________________________

Date of Birth: _______________________________

**Short Answers**

Please answer each of the following questions to the best of your ability. Answers should not exceed 5 paragraphs.

1. Why are you interested in participating in *The He‘eia Ahupua‘a Internship*?

2. What relevant experiences make you a strong candidate for this outdoor internship?

3. How do you plan on using your experiences gained through this internship to advance your education, career or personal life?
Background Questions:

1. Have you hiked before? _____ Yes _____ No
   If yes, how would you rate your hiking ability on a scale of 1 (novice) – 5 (very experienced):

2. Do you swim? _____Yes _____No
   If yes, how would you rate your swimming ability on a scale of 1 (novice) – 5 (very experienced):

References:

Please provide contact information for three character references.

1. Reference Name: __________________________________________
   Job Title/Organization or Affiliation: ____________________________
   Contact Number: ____________________________
   E-mail: ____________________________________________

2. Reference Name: ____________________________________________
   Job Title/Organization or Affiliation: ____________________________
   Contact Number: ____________________________
   E-mail: ____________________________________________

3. Reference Name: ____________________________________________
   Job Title/Organization or Affiliation: ____________________________
   Contact Number: ____________________________
   E-mail: ____________________________________________

I certify that all of the statements made in this application are true to the best of my knowledge.

_________________________________ ________________________
Applicants Signature Date