

Applications must be received by May 31, 2019

Send to:

HWCIA

3375 Koapaka St. Suite F 220-43

Honolulu, Hawaii 96819

Applicant's Full Name: _____ **Date of Birth:** _____

Address: _____

_____ **Phone:** _____

E-Mail _____

High School Presently Attending: _____

Father's Name (or Guardian's name): _____

Father's Employer: _____ **Union Affiliated with:** _____

Mother's Name (or Guardian's Name): _____

Mother's Employer: _____ **Union Affiliated with:** _____

What field of study do you plan to pursue? _____

What school do you plan on attending? _____

Have you been accepted at this institution? _____

What extracurricular or community activities do you participate in?

Have you received any Awards, Honors or Special Recognition from your school or for community service?

