CITY AND COUNTY OF HONOLULU
NOMINEE/APPOINTEE FORM

1. Position Nominated to: _____

2. Name: _____
(First) (Middle) (Last)

3. Are you a citizen of the United States? -select-
Are you a resident of the City and County of Honolulu? -select- If yes, how long -select-
Are you a registered voter in the City and County of Honolulu? -select-

4. Occupation: _____

5. Name and address of employer or firm:
_____
_____

6. Does your employer do any business with the City and County of Honolulu? -select-
If yes, state the nature of business and approximate dollar amount in the last five years:
_____
_____

7. Do you or does any member of your immediate family hold office or own stock in any firm?
-select-

8. Does the firm do business with the City and County of Honolulu? -select-
If yes, provide details including the name(s) of the firm:
_____
_____

9. Do you have any part-time employment, professional activity, or financial interests other than those indicated in the previous question? -select-
If yes, provide details:
_____
_____

10. Do you foresee any possible conflict between your present work, financial investments, business transactions or any other activity which would be incompatible with the proper discharge of your official duties or hinder you from effectively carrying out the duties for which you have been appointed? -select-

11. Are any members of your family employed by the City and County of Honolulu or any attached agency? -select-
If yes, please specify the department and division:
_____

12. Are there any incidents in your past that may jeopardize your nomination? -select-

13. Have you ever been convicted of a felony? -select- If yes, provide details:
_____
_____

14. Education:

_____
_____
_____

15. Provide a summary of major work experience for the last ten (10) years. Begin with your present job including military (attach additional sheets if necessary or resume):

_____
_____
_____

16. Community activities, etc. (also list any service on any other board or commission Federal, State or County):

_____
_____
_____

17. Have you ever been a member of a board or commission with the City and County of Honolulu?
-select-
If yes, provide name(s) of board/commission:

_____
_____

18. Will you be able to commit to the full term of this appointment? -select-

19. Will you be able to commit to meeting dates and times? -select-

20. Are you regularly away from Honolulu? -select- If yes, please explain:

_____
_____

21. Are you willing to make a confidential financial disclosure to the city Ethics Commission upon appointment and yearly thereafter? -select-

22. What do you understand to be the prime duties of your county appointment?

_____
_____
_____
_____

The above statements made by me are true, complete, and correct to the best of my knowledge and belief and are made in good faith.

_____ _____
(Signature) (Date)

The above statements made by me are true, complete, and correct to the best of my knowledge and

The completed form and any attachment(s) will be posted by the City Clerk and available on the City's DocuShare Website.

ELECTIONS DIVISION
OFFICE OF THE CITY CLERK
CITY AND COUNTY OF HONOLULU
VOTER REGISTRATION CERTIFICATE APPLICATION

530 South King Street, Room 100
Honolulu, HI 96813
Phone: (808) 768-3800

To request a voter registration certificate for the following City Appointment, Board or Commission member, please fill out the following:

1. Position nominated to: _____

2. Name: _____
   (First) (Middle) (Last)

3. Resident address: _____
   _____

4. Telephone: _____(primary) _____(secondary)

5. Birth Date (Information will be used to verify individual): _____

****

Voter registration certificate to be returned to:

1. Name of Contact Person: _____

2. Department and Division: _____

3. Contact Phone Number: _____

Please note: *Voter registration certificate application will be processed within 24 hours. Executive Branch contact person will be called when ready for pick-up.*