

**OFFICE OF HAWAIIAN AFFAIRS
NATIVE HAWAIIAN HISTORIC PRESERVATION COUNCIL**

APPLICANT'S PERSONAL HISTORY

Our goal is to select members who bring a variety of skills and life experiences to the Council. The answers to the following questions can assist us in this effort.

Submit to: OHA, 711 Kapi'olani Blvd., Ste. 500, Honolulu, HI 96813 ♦ Fax: (808) 594-1765 ♦ Tel: (808) 594-1961

Name	Date	
Please check preferred title ___Mr. ___Miss ___Ms. ___Mrs. OTHER_____	Email	
Residence Address	Phone/Cell	Fax
Business Address	Phone/Cell	Fax
Occupation	Place of Birth	
Length of residence in Hawai'i	Length of residence in geographic region	

Which geographic region do you represent: _____
Mokupuni (Island)
Moku (District)
Ahupua'a (Land Division)

What is your connection to this geographic region? (Use additional sheets if needed.)

Employment History (Attach Resume if available)

From (Year)	To (Year)	

Relevant Community Experience and Professional Organizations (Use additional sheets if needed.)
