

To use this sheet, please go to File > Make a Copy. This will add a copy of this Google Sheet into your own Google Drive so you can make edits and fill in information as needed.

After submitting your application, you are able to ADD experiences. You are UNABLE to edit/delete.

# No Limit	Experience Type	Organization Name	Organization Address (City, Country, Zipcode, State/Province)	Supervisor Name	Supervisor Title	Supervisor Contact #	Supervisor Contact Email	Start Date (MM/DD/YYYY)	Current Experience (Y/N)	End Date (MM/DD/YYYY)	Status	Experience Title	Type of Recognition	Avg. Weekly Hours	# of Weeks	Total Hours	Release Authorization - May we contact this organization? Y/N	
Example	Employment	John Doe LLC	1234 Main St, Honolulu, HI, 96822	John Doe	Dr.	808-123-4567	john.doe@gmail.com	06/01/2022	N	08/01/2022	Full Time	Medical Assistant	Compensated	8	8	64	Y	
	Description/Key Responsibilities [1]	While employed... (MAX 600 CHARACTERS)																
1																		
	Description/Key Responsibilities [2]	(MAX 600 CHARACTERS)																
2																		
	Description/Key Responsibilities [3]	(MAX 600 CHARACTERS)																

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#	Achievement Type	Name	Name of Presenting Organization	Issued Date (MM/DD/YYYY)
<b>No Limit</b>				
<b>Example</b>	Awards	Provost Achievement Scholarship	University of Hawaii at Manoa	06/01/2022
	<b>Brief Description [4]</b>	(MAX 600 CHARACTERS)		
<b>1</b>				
	<b>Brief Description [5]</b>	(MAX 600 CHARACTERS)		
<b>2</b>				
	<b>Brief Description [6]</b>	(MAX 600 CHARACTERS)		

[1] Max 600 Characters

[2] Max 600 Characters

[3] Max 600 Characters

[4] Max 600 Characters

[5] Max 600 Characters

[6] Max 600 Characters