For any HireNet Hawaii account questions, please contact the American Job Center of Hawaii: Oahu (808) 768-5701, Maui (808) 270-5777, Hawaii (808) 935-6527, Kauai (808) 274-3056



How to Navigate HireNet Hawaii

Creating a New Account in HireNet Hawaii

- Access the HireNet Hawaii website by visiting this URL:
- <u>https://www.hirenethawaii.com</u>
- To create a new account, click on the "Sign IN" link





Retrieving your User Name or Password for an existing HireNet Hawaii account

User Nan	ne:	7	
Password	ł:		
	I'm not a robot	reCAPTCHA Privacy - Terms	
	Sign In		

Click on "Retrieve User Name or Password"



Select Option 3 – Create a User Account

Option 3 - Create a User Account

If you would like to become a fully registered user with HireNet Hawaii and have access to all of our online services, select one of the following account types. If you are not sure if you need to register on the system, learn more about the benefits of registering on page: <u>Why Register?</u>.

A



• Select "Individual" for a Jobseeker account

Privacy Agreement

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 \checkmark

Privacy Agreement

- Menu

I authorize the exchange of information relating to prior assessment(s) for training and employment including work history, quarterly wage data, and Unemployment Compensation benefits with HireNet System Partners.

This Release of Information does not authorize the disclosure of any medical information or any other restricted third party information.

I understand that this information will be used to determine eligibility for employment and training services, will assist in the development of my individual training plan for education and/or employment, and will be used for statistical purposes.

I allow the HireNet System Partners identified to release to each other the requested information when I am referred to partner services. I understand the information will be used only on an as needed basis and will remain confidential, to the extent required and/or permitted by law. This information cannot be shared with any other entity without my written permission.

A copy of this Release of Information is as valid as the original. This Release is valid for both program and follow-up services.



• After reading the agreement, click "I agree" to continue

Login Information:

- Create a User Name and Password for the account
- Be sure to select a Security Question and enter in the corresponding response before moving to the next section

Login Information



Social Security Number

The next section is to enter in the SSN number. This is an important step, because the SSN is required as it is linked to your Unemployment Insurance Account for benefits.

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Q

Social Security Number

* Social Security Number

(SSN):

Do not enter dashes (for example, 999001111)

*Re-enter Social Security	
Number:	

Primary Location Information

 In this section, enter in the location information by Country, Zip Code and answer the question regarding work authorization

Primary Location Information

* Country:	United States 🔹
* Please enter your zip code:	Find zip code
* Are you authorized to work in the United States?	🔿 Yes 🧿 No

Email Address & Demographic Information

E-mail Addr	ess	-
Primary E-mail:	Create E-mail Account	
Confirm Primary F-mail Address:	Read Our E-mail Security Policy	

• Enter in the email address for this account.

Demographic Info	rmation
* Date of Birth:	(MM/DD/YYYY)
Age:	
*Gender:	O Female O Male O I do not wish to answer.
* Have you registered with the Selective Service?	None Selected

- Enter in the Date of Birth and Gender
- If you are male, use the drop down to make a selection for Selective Service
- Click on the "I'm not a robot" (reCAPTCHA) box and click NEXT to move forward

Name and Address

- The next two screens will request name information and address information
- If the Residential Address is the same as the Mailing Address, click the box to "Use residential address" to have the system autofill the information

Name	
* First Name:	
Middle Initial:	
* Last Name:	

Residential Address	Mailing Add	iress
	This is where you re	ceive your mail.
Are you homeless? O Yes O No	Use residential	address

Phone Numbers and Notification Methods

Phone Numbers

* Primary Phone:	Ext:
* Primary Phone Type:	None Selected 🛛 🕶
Alternate Phone:	Ext:
Alternate Phone Type:	None Selected 🗸
Text Message Cell Phone Number:	
Fax:	

• Add all phone numbers that may be available for this account

Preferred Notification Method

* Please select a method in which you prefer to receive your notifications:



Site Access

* From where are you accessing this website?

* How did you hear about this website?

None Selected

None Selected

- Make the preferred selection for notification method using the drop down menu
- Additionally, fill in the Site Access questions as well using the corresponding drop down menus

Citizenship & Disability

• The next two screens will request information regarding Citizenship status and if the individual would like to disclose any disabilities

Disability

Providing this information is optional and refusal to provide disability information will provided by law and will be used only in accordance with the law. Please note that fo support services and programs if you have a disability.

* Do you wish to disclose a disability? Yes, I have a disability I wish to disclose.No, I do not have a disability.

O I do not wish to answer.

<u>Citizenship</u>		
* Citizenship:	None Selected	•



Education Information

 Using the drop down menu, select the proper status of Highest Education Level achieved and if still attending school

Education Information

* Your Highest Education Level Achieved:	None Selected 🗸
	If you have a High School Diploma or High School Equivalency Diploma, please select the appropriate value of High School Diploma or High School Equivalency Diploma.
*Are you attending school?	None Selected 🗸

Employment Information

- Using the dropdown menus, make the proper selections related to Employment Information.
- If you have filed for Unemployment, Unemployment Eligibility Status = Claimant
- UI Referred by Status = Not Applicable
- Claimant has been exempted from work search = NO
- If YES = received a notice of termination, layoff or military separation, date of termination, layoff or military separation will be requested

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Employ	yment Info	rmatio	on						
*Current E	mployment State	ıs:	None Select	ed 🔻 !					
* <u>Type of b</u>	usiness worked i	<u>n</u> :	None Select	ed 🔻 !					
* <u>Unemplo</u>	yment Eligibility	<u>Status</u> ?	None Select	ed	•				
*Are you c work?	urrently looking	for	🔿 Yes 🔵	No					
Within th or layoff separatin	e last 12 months from your job or g from military s	, have you received ervice?	u received a n documentatio	otice of termina on that you are	ation				
🖲 Yes, I	have recently rece	ived a not	ice of terminat	ion, layoff or mil	itary separation.				
🔘 No, I ł	nave not recently r	eceived a	notice of term	ination, layoff or	military separati	on.			
Date o	f Layoff, Termina	tion or		👿 <u>Today</u> (MM,	/DD/YYYY)				

Farmworker Information

 At the bottom of the page, answer the Farmworker Information. Depending on how this is answered, additional question fields may be populated.



Ethnic Origin

• Select the boxes that apply for Ethnic Origin

Ethnic Origin

*Are you of Hispanic or Latino 🔿 Yes 🔿 No 🔿 I do not wish to answer. heritage? * Race - Please check all that African American/Black apply: American Indian/Alaskan Native Asian Hawaiian/Other Pacific Islander White I do not wish to answer.

Military Service

 Next questions are all Military related. Be sure to answer all as they apply. Depending on how you answer some of the questions, additional questions may populate.

Military Service

Veterans and their spouses may be entitled to State and questions.

- * Are you currently in the military, a veteran or the spouse of a veteran?
- * Are you a caregiver who is a spouse or family member to a member of the armed forces who is wounded, ill or injured and receiving treatment in a military facility or warrior transition unit?
- * Are you a member of the armed forces who is wounded, ill or injured and receiving treatment in a military facility or warrior transition unit?

O Yes O No

O Yes O No

🔿 Yes 🔿 No

Public Assistance

- These questions are all related to any type of public assistance the household may be receiving
- Make the proper selections ٠ for those that apply
- Click "Finish" at the bottom of the page to complete the registration.

Public Assistance

Please provide answers to the following questions if any apply within the last 6 months.

- * Has your household received **Temporary Assistance for Needy Families (TANF)** payments? * Have you been determined eligible for or received Supplemental Nutrition
 - O Yes O No
 - O Yes O No
- Assistance Program assistance (SNAP formerly known as Food Stamps)?
- * Have you received General O Yes O No **Assistance Payments?**
- * Have you received Refugee Cash Assistance Payments?
- * Have you been supported through the State's Foster Care System?
- O Yes O No
- O Yes O No

What would you like to do next?

- E Menu 🛕 Information 🛛 😚 Home 🚯 Accessibility 🕜 My Dashboard 🕞 Sign Out 💄 Services for Individuals 🚢 Services for Employers 🛄 Labor Market Analysis Quick Search What would you like to do next? Job Search This option will view current job listings in your area that match your interests and experience. Résumé Builder This option will take you through the steps of creating a professional résumé or job application. Résumés can be placed online making them available to the top employers in your area. **Other Resources Available** You may wish to look at other resources available on this site by clicking one of the links below. Career Services Job Seeker Services Unemployment Services O Veteran Services C Education Services Assistance Center
- Go to Resume Builder to complete resume