11/27/23, 6:42 PM Candidate Detail

MY ACCOUNT

| | | | | | | | | | Candida |
|---|--------------------------------|---------------------------------|--|--------|----------------------------|--|-----------------------|--------------------|---------|
| Summary | Detail | inDepth | Updates | ATS | Campaigns | CRM | Emails | | |
| | | (she, her, hers neral Practi | | II | J | | 0 | ID#: 855964 | |
| chelseykah | oonei@gm | ail.com | | | | | | | |
| 41-211 Kanehunamoku Pl Waimanalo, Hl 96795 | | | Mobile Phone: Home Phone: | | (808) 383 - 4285 | Date Available: Date Submitted: | | 11/2023 | |
| | | 3 3 | | | Not Provided | | | 11/27/2023 | |
| | | | Work Pl | none: | Not Provided | Date Upda | | 11/27/2023 | |
| Client I | nformatio | n | | | | | | | |
| Descrip | otion: | | | | | | | | |
| Profession | al Informa | tion | | | | | | | |
| Profession | ofessional Status: | | Other | | | | | | |
| Board Stat | oard Status: | | Board Certified | | | | | | |
| Authorized Employer i | | | U.S. C | itizen | | | | | |
| State Licen | se: | | HI | | | | | | |
| School: | | | University of Hawaii Maui College (2021), United States | | | | | | |
| nternship: | | | Not Provi | | | | | | |
| Residency: | | | Not Provi | | | | | | |
| Fellowship | | | Not Provi | ded | | | | | |
| • | al Interest | s: | Not Provi | ded | | | | | |
| Profession | | | | | | | | | |
| | nformation | l | | | | | | | |
| Profession | | | eference | | Home State: | | Hawaii | | |
| Profession | mmunity: | No Pr | eference rovided | | Home State: Sig. Other | | Hawaii Not Provide | ed | |
| Profession Personal Ir | mmunity: | No Pr Not P | | | | ĺ | Not Provido | ed | |
| Profession Personal Ir Type of Co | mmunity: Other: ographic | No Pr Not P Not P | rovided | | Sig. Other | ļ | | | |