



EMPLOYMENT APPLICATION

Print Application. Fill out. Bring to the Salon
(If you live out of town, fax to 858-345-1897)

Name: _____ Phone: _____

Email _____

Address: _____

City: _____ State: _____ Zip _____ How Long: _____

Previous Address (If less than 3 years): _____

City: _____ State: _____ Zip _____ How Long: _____

SS#: _____ - _____ - _____

Are you prevented from lawfully becoming employed in this country because of Visa or immigration status? Yes/No _____

Position Sought: _____

Name of Current Employer: _____

Address: _____

City/State: _____ Zip: _____ From/To: _____

Current Position: _____

Name of Direct Supervisor: _____ Phone: _____

Previous Employer: _____

Address: _____

City/State: _____ Zip: _____ From/To: _____

Position: _____

Name of Direct Supervisor: _____ Phone: _____

High School attended: _____ Grade Attended to: _____

Diploma? Yes/No: _____ Year Graduated: _____

College Attended: _____ Date(s) Attended: _____

Degree: _____ Major: _____

What 3 things matter most to you at work?

1) _____

2) _____

3) _____

What are the 3 most important things to a client?

1) _____

2) _____

3) _____

What are your strengths? _____

What are your computer skills? _____

What's your favorite time of day? _____

What hours/days are you available to work? _____

What other interests do you have? _____

References:

Give the names of 3 business references that you have known for at least one year:

	<u>Name</u>	<u>Phone</u>	<u>Years Acquainted</u>
1)	_____		
2)	_____		
3)	_____		

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentation are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make agreement contrary to the foregoing."

Date: _____ Signature: _____