

Application for Employment



Our Policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability or veteran status.

PLEASE PRINT

Position(s) applied for _____ Date of application ____/____/____

Referral Source Advertisement Employee Relative Walk-in Other _____

Name of source (if applicable) _____

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

Telephone () _____ Cell / Pager / Other Phone () _____

Are you 18 years of age or older? YES NO

If necessary, best time to call you at home is _____ A.M. _____ P.M.

May we contact you at work? YES NO

If yes, work number and best time to call () _____ A.M. _____ P.M.

Do you need any extended period of time off for any reason in the next year? YES NO

If yes, please explain _____

How many years have you tanned indoors? _____

What is your favorite lotion? _____

Where do you currently tan? _____

What do you like most about that specific salon? _____

What do you like least about that specific salon? _____

Have you ever been employed here before? YES NO

If yes, give dates From ____/____/____ To ____/____/____

Date available for work ____/____/____

Type of employment desired Full-Time Part-Time Seasonal

At which location(s) are you interested in working?

NEWBURGH NORTH PARK WASHINGTON AVE. WEST NORTH GREEN RIVER

Have you been convicted of a felony? (This will not necessarily affect your employment.) YES NO

If yes, please explain _____

Educational Background

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

References

List names and telephone numbers of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references that are *not* related to you.

NAME	TELEPHONE	YEARS KNOWN
	()	
	()	
	()	

Additional Information

List professional, trade, business, or civic associations and any offices held.

EXCLUDE MEMBERSHIPS WHICH WOULD REVEAL RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR ANY OTHER SIMILARLY PROTECTED STATUS.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc.

EXCLUDE INFORMATION WHICH WOULD REVEAL RACE, RELIGION, NATIONAL ORIGIN, AGE, COLOR, DISABILITY OR OTHER PROTECTED STATUS.

List any additional information you would like us to consider.

Employment History

Provide the following information from your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary).

EMPLOYER	TELEPHONE ()	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
JOB TITLE		HOURLY RATE/ SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	
EMPLOYER	TELEPHONE ()	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
		FROM	TO	
ADDRESS				
JOB TITLE		HOURLY RATE/ SALARY		
		STARTING		
IMMEDIATE SUPERVISOR AND TITLE		\$	PER	
REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
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REASON FOR LEAVING		HOURLY RATE/SALARY		
		FINAL		
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER		\$	PER	

Comments: YOU MAY INCLUDE EXPLANATION OF ANY GAPS IN EMPLOYMENT _____

Skills and Qualifications: Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Salon Hours	Hours you are available to work:
Hours are seasonal and are subject to change.	Please be specific on your availability. Examples: Noon – Close, Open – Close, 10:00 a.m.– 5:00 p.m.
Sunday 9:30 a.m. - 9:30 p.m.	
Monday 6:30 a.m. - 10:30 p.m.	
Tuesday 6:30 a.m. - 10:30 p.m.	
Wednesday 6:30 a.m. - 10:30 p.m.	
Thursday 6:30 a.m. - 10:30 p.m.	
Friday 6:30 a.m. - 10:30 p.m.	
Saturday 7:30 a.m. - 9:30 p.m.	

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for my dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is “at will” which means that either this company or I can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor; manager or executive of this company, other than the president has any authority to alter the foregoing.

Signature _____ **Date** _____