

## **Application and Profile Form**

The information requested on this sheet is designed to assist in the evaluation of your ability to benefit from Bombshell Beauty Salon & School. Please print your answers for each question. Bring your completed for in with you for your interview or mail to Bombshell Beauty Salon & School.

I. Personal		
Name:		
Address:		
City:	State:	Zip:
Phone: Home	Cell:	
Date of Birth:	Single:	Married:
U.S. Citizen: Yes No	o Social Security #:	
Email Address:		
How did you hear about Bo	ombshell Beauty?	
II. Education		
Did you graduate from Hig	gh School?	
Please list the school, along	g with location, and year of gr	raduation.
School:		
Location:		
Did you receive a General	Equivalency Diploma (GED)	9

Where did you receive it?		<del></del>
III. Employment		
If you are currently employed, please	e list the location:	
Employer		
How long employed?	Position:	
IV. General Information		
Hobbies and areas of interest to you's	?	
Do you like to: Be with people?	Help people?	
Have you ever worked with the public	ic?	
What kind of work did you do?		
	in Cosmetology?	
	nost to you, and why?	
In case of emergency please notify:		
_	Relation:	
Phone:		
	State: Zip:	

I certify that this personal profile is completed accurately and honestly. In additional Bombshell Beauty Salon & School to verify the above information.	ition, I authorize
Signature	
Date	