



Employment Application

Applicant Information

Full Name: _____ Date: _____

Address: _____

Phone: _____ Email: _____

Date Available: _____ Desired Salary: \$_____

Position Applied for: _____

Have you applied here before? Yes No

If yes, position & date of application: _____

Employment Desired: Full Time Part Time Internship Seasonal

What prompted you to apply at Bliss Hair Studio?

Referral _____

Other _____

Are you over 18 years old? Yes No If no, are you authorized to work in the U.S.? Yes No

Have you ever been convicted of a felony for which the record has not been judicially ordered sealed, expunged, or eradicated? (Applications will not be denied employment solely on the grounds of a conviction, The nature and date of the offense and surrounding circumstances may be considered.)

Yes No

If yes, explain: _____

Qualifications

Certified Position: _____

IL State License Number: _____

Qualifications & Special Skills: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

Cosmetology School: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Diploma: _____

References

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Availability

Please indicate the days and times you are available to work:

Disclaimer and Signature

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above given you and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

Signature: _____ Date: _____