

Employee Application Form

This Information is Private & Confidential!

Please answer each **question** completely-and as honestly as possible-so we may support you fully in achieving personal fulfillment, as well as professional and financial success.

_				
: Zip Code:				
Home Number:				
now?				
tations do you have?				
	Zip Code: Number: Years at current Salon / Spa: now?			



Position(s) Applied for:
Why did you apply for this position?
What were your reasons for leaving your last job?
Do you have reliable transportation?
How were you paid in your last or current job? Check appropriate one:
Commission: (If so, what % are you paid?%) Booth Rental:
What do you need to earn? \$What do you want to earn? \$
How many days and hours do you currently work per week?
How many days and hours would you like to work per week?
What is your average weekly <i>Client count?</i>
What do you believe are your Top three strengths? 1.
2.
What do you believe are your Top three areas to improve? 1.
2
3.
How do you see yourself contributing to the growth of our company?



Are you available to work:Full Time	Part Time	Temporary	Date Available:	
Have you been previously employed by us?	If yes, v	If yes, when		now?
What languages besides English can you speak and	d write fluently?			
Do you possess a valid Driver's License?	_Yes _No	Expiration Date	e:	
Do you have your own transportation?Yes	_No	Is it reliable?	_Yes _No	
Have you ever been convicted of a crime, including	g "no contest" plea	as, other than minor t	raffic infractions?	Yes _No
If yes, describe: Offense:				
Conviction of a crime in itself does not void your chance You need not disclose convictions that have been judicia				grounds for disqualification or dism
Do you ingest any controlled substance that c	ould affect your	job performance?	_YesNo	
EDUCATION AND TRAINING:				
Name of School	From	Т	`o	Graduated?
High School				(Yes or No)
	· <u>-</u>			
College(s) or Other				
Cosmetology School				

In compliance with State and Federal laws, Tuscan Sun Spa & Salon does not discriminate on the basis of race, color, religion, sex, national origin, ancestry, age, physical or mental handicap, or medical condition in the in its employment practices.



TUSCAN SUN SPA AND SALON

List any related business, trade or special training; or list professional or trade licenses or certificates:

1		3				
2						
			-			
EMPLOYMENT EXPERIENCE: List all employers for the last						
unemployment. If you need additional space, please continue o	n a separate	sheet of paper or att	ach a resume.			
Employer Phone	Dates Employed		Duties			
Address	From	То				
Job Title						
Supervisor May we contact?	-					
Reason for Leaving	-	_				
Employer Phone	Dates Employed		Duties			
Address	From	То				
Job Title						
Supervisor May we contact?	-	1				
Reason for Leaving	1					
Employer Phone	Dates Employed		Duties			
Address	From	То				
Job Title						
Supervisor May we contact?	1					
Reason for Leaving	1					
Employer Phone	Dates Employed		Duties			
Address	From	То				
Job Title						
Supervisor May we contact?	1					
Reason for Leaving	1					
PERSONAL REFERENCES: Do not include previous employers o	r relatives. L	ist names, address ar	nd phone number.			
1.						
2.						
3.						
	ation for Em	nlovment including a	all attachments is true, correct and			
I hereby declare the information provided by me in this Application for Employment, including all attachments is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application or						
attachments shall be considered cause for dismissal. You are hereby authorized to contact any persons or firms listed on my						
application and/or resume to substantiate claims of employment, education, character, etc. Furthermore, upon offer of employment, I						
agree to furnish proof of eligibility for employment in the United States.						
D. 4						
Signature:	Date:					