



Application for Salon Employment

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

DOB ___/___/___

Cosmetology License# _____

SSN _____

Have you been convicted of a state or federal felony? If yes, please explain

Are you presently employed? _____ May we contact your employer?

Date you can begin

EMPLOYEEMENT HISTORY:

1. Employer (starting with present or most recent) _____ Phone #

Title

_____ Supervisor _____

Reason for Leaving

Employed From/To _____ Compensation/Salary

Duties Performed



2. Employer (starting with present or most recent) _____ Phone #

Title

_____ Supervisor _____

Reason for Leaving

Employed From/To _____ Compensation/Salary

Duties Performed

3. Employer (starting with present or most recent) _____ Phone #

Title

_____ Supervisor _____

Reason for Leaving

Employed From/To _____ Compensation/Salary

Duties Performed

EDUCATION:

Name & City of Cosmetology School

Date Started _____ Date Graduated

Name & City of University _____ # years completed _____

Major _____ Degree Earned



Please list all advanced courses, training, educational seminars, and conferences you have attended:

Four horizontal lines for listing advanced courses, training, educational seminars, and conferences.

Please list all professional memberships that will be beneficial to your work in this position:

Four horizontal lines for listing professional memberships.

REFERENCES:

List three references (include two professional references)

Form for the first reference, including fields for Name, Phone #, Address, City, State, Zip, and Title and/or relationship.

Form for the second reference, including fields for Name, Phone #, Address, City, State, and Zip.



Title and/or relationship

3. Name _____ Phone #

Address

City _____ State

_____ Zip _____

Title and/or relationship
