



## Salon Employment Application

NAME		DATE	
ADDRESS		CONTACT NUMBER	
CITY	STATE	ZIP CODE	
Have you applied here before?      Yes      No		Position Applied For: _____	
Total experience in the position applying for? _____			
Type of Arrangement:      Full Time      Part Time      Temporary			
When can you start to work here? _____			
What is your expected salary? _____			
EMPLOYMENT EXPERIENCE (Last 3 latest employer including the current)			
1	EMPLOYER NAME		POSITION
	ADDRESS		
	CONTACT NO.	SUPERVISOR'S NAME	JOB TITLE      SALARY
	REASON FOR LEAVING		PERIOD
2	EMPLOYER NAME		POSITION
	ADDRESS		
	CONTACT NO.	SUPERVISOR'S NAME	JOB TITLE      SALARY
	REASON FOR LEAVING		PERIOD
3	EMPLOYER NAME		POSITION
	ADDRESS		
	CONTACT NO.	SUPERVISOR'S NAME	JOB TITLE      SALARY
	REASON FOR LEAVING		PERIOD
RELEVANT EDUCATION TAKEN			
Level	School	Period	