

A Great Escape

Application For Employment

Personnel Administrators

Julie and Jim Cales, owners

Ashley Bishop, manager

Becky Jackson, assistant, manager

Please Print

Position Applied For _____ Date Of Application _____

Name / Last First Middle

_Address City State Zip

—

Telephone Number Cell Phone Social Security Number

If you are under 18, can you furnish a work permit?

_____yes _____no

Date of birth _____

Educational Background

High School _____yes no _____ Hair Academy Attended

Advanced Styling Schools Attended _____

Other Schools

Skills and Qualifications

How many years of Salon experience _____ Briefly, Summarize any training, licenses, certificates and or characteristics of yourself that may qualify you as being able to perform job - related functions for the position which you are applying. (Please Print)

References

Please list three references from former employers. List names, addresses and telephone numbers. (Please Print)

1. _____

2. _____

3. _____

Equal Opportunity Employment

The Salon is an Equal Opportunity Employer. The Salon does not discriminate in employment. No question on this application is used for the purpose of limiting, or excusing any applicants consideration for employment on bases prohibited by local, state, or federal law.

This application is current for only 1 Year. At the conclusion of that time, if you have not heard from the employer and still want to be considered for employment, it will be necessary to fill out another application.

Any information that is collected from clients and/or employees is considered confidential. This includes all phone numbers and addresses. As soon as the information is collected a file is created, that file is the property of A Great Escape Salon and shall not be used other than for salon purposes. Any misuse of information will be considered an offense that will lead to prosecution.

I certify that all the facts and information provided by me on this application are true and complete to the best of my knowledge. I understand that falsification and or misrepresentation of statements on this application may result in the termination of my employment.

Signature of Applicant _____ *Date* __/__/__

Signature of Owner *Date*

__/__/__