

## Corey Paul's Hair Studio Application Employment: Stylist, Shampoo Tech-Assistant , Salon Receptionist

### **GENERAL INFORMATION**

(Please Print)

| Name(first)           | (middle)                      |               | (last)         |  |
|-----------------------|-------------------------------|---------------|----------------|--|
| Date                  |                               |               |                |  |
| Address               |                               | City          |                |  |
| State                 | Zip                           |               |                |  |
| Phone                 | Email                         |               |                |  |
| DOB//                 | Social Security #             |               |                |  |
| Full Time [ ] Part Ti | ime [ ]                       |               |                |  |
| Position applied for  |                               |               |                |  |
| Have you ever been    | convicted of a felony? Yes_   | No            |                |  |
| If yes please explain | 1                             |               |                |  |
| Cosmetology Licens    | se#                           |               |                |  |
| Are you licensed in   | any other states and/or coun  | tries? If so, | o, which ones? |  |
| Referred by:          |                               |               |                |  |
| Do you have any fri   | iends or relatives employed b | y us?         |                |  |
| Are you presently e   | mployed?                      |               |                |  |
| May we contact you    | ar employer? Yes No_          |               |                |  |
| Date you can begin    |                               |               |                |  |

#### **EMPLOYMENT HISTORY**

| Employer (starting with present or most recent) |            |  |  |  |
|---|------------|--|--|--|
| Phone #   |            |  |  |  |
| Title   | Supervisor |  |  |  |
| Reason for Leaving                              |            |  |  |  |
| Employed From/To                                |            |  |  |  |
| Compensation/Salary                             |            |  |  |  |
| Duties Performed                                |            |  |  |  |
|   |            |  |  |  |
| Employer (starting with present or most recent) |            |  |  |  |
| Phone #   |            |  |  |  |
| Title   | Supervisor |  |  |  |
| Reason for Leaving                              |            |  |  |  |
| Employed From/To                                |            |  |  |  |
| Compensation/Salary                             |            |  |  |  |
| Duties Performed                                |            |  |  |  |
|   |            |  |  |  |
| 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 \_\_\_\_\_ Number of years completed \_\_\_\_\_ Major \_\_\_\_\_ Degree Earned Please list all advanced courses, training, educational seminars, and conferences you have attended: REFERENCES List three references (include two professional references) Name Phone # \_\_\_\_\_ Address Title and/or relationship \_\_\_\_\_ Phone # Address Title and/or relationship \_\_\_\_\_ Name \_\_\_\_\_ Phone # Address Title and/or relationship \_\_\_\_\_

#### **Please Read This Section Below Carefully Before Signing:**

I certify that I have read and fully completed this form and that the information contained herein is correct to the best of my knowledge. I understand that any omission or false information is grounds for dismissal. I understand that as part of the procedure for my application for employment, I give the Employer the right to investigate all references listed and the right to secure additional information about me if job related. I agree that my signature on this application is binding and enforceable. I acknowledge and agree that by signing this application, I waive all rights to dispute the validity of my signature on this application. Various federal, state/provincial, and local laws prohibit discrimination on account of race, color, religion, sex, age, national origin, disability, veteran's status and other protected classes. Its Corey Pauls Hair Studio LLC responsibility to comply fully with these laws as applicable.

I acknowledge that I am applying for employment with Corey Paul's Hair Studio LLC an independently owned business.

| Signature of Applicant: |  |  |
|-------------------------|--|--|
|                         |  |  |
| Date                    |  |  |