

APPLICANT INFORMATION

Full Name: _____ Date: _____
Last First MI

Address: _____
Physical Address: Street City/Town State ZIP Code

_____ Mailing Address: Street City/Town State ZIP Code

Phone: _____ E-mail: _____

Emergency Contact: _____ Phone: _____

Position: _____ Date Available: _____

Are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Do you have a current, valid driver's license? YES NO

EDUCATION

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

REFERENCES

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

PREVIOUS EMPLOYMENT

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

DISCLAIMER & SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I authorize an investigation of all statements contained in this application and authorize any of the persons in this application to provide any and all information concerning my previous employment, education or other information, personal or otherwise, with regard to any subjects covered by this application. I release all parties from all liability for any damage that may result from furnishing such information to you.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand that wages, benefits, and other terms and conditions of employment may change from time to time at the discretion of STELLA Hair Boutique without prior notice. I understand that STELLA Hair Boutique reserves the right to modify policies at any time, without prior notice.

I acknowledge that if I am employed by STELLA Hair Boutique, my employment will be at-will, meaning that STELLA Hair Boutique is free to terminate my employment at any time, for any reason, with or without cause, and I have the same rights.

Signature: _____ Date: _____