



SALON MICHAELS

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Name: _____ Date: _____
Address: _____ City: _____ State: _____ Zip: _____
Home Phone: (____) _____ Cell Phone: (____) _____
Email: _____ Occupation: _____ DOB: ____/____/____
SSN: _____ Are you a citizen of the USA? ___ Yes ___ No
Have you applied here before? ___ Yes ___ No
Position applied/applying for? _____
When can you start? _____ Full time _____ Part time

EMPLOYMENT EXPERIENCE; Start with your present job or last job. Include military assignments and other volunteer activities.

Employer 1 _____
Address _____ City _____ State _____ Zip _____
Phone # _____ Supervisors' Name _____
Job Title _____ Reason for leaving _____
Dates of Employment: From _____ To _____ Salary or Hourly rate _____

Employer 2 _____
Address _____ City _____ State _____ Zip _____
Phone # _____ Supervisors' Name _____
Job Title _____ Reason for leaving _____
Dates of Employment: From _____ To _____ Salary or Hourly rate _____

Employer 3 _____
Address _____ City _____ State _____ Zip _____
Phone # _____ Supervisors' Name _____
Job Title _____ Reason for leaving _____
Dates of Employment: From _____ To _____ Salary or Hourly rate _____

EMPLOYMENT APPLICATION PART 2

EDUCATION

Schools/Colleges Attended:

Years

Year Grad.

Degree

Describe any special qualifications for this job:

Please list some references:

Drivers License # _____ State _____ Expiration _____

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract of employment. In the event of employment, I understand that false or misleading information given on my application or interview may result in termination.

Signature _____ Date _____
