APPLICATION FOR EMPLOYMENT ~ Please Attach A Resume & Cover Letter				
Please Prin	t:			
Position Applying For:	Full Time:		Part Time	:
Desired Salary: Available St				
GENERAL INFOR				
Name:				
Current Address:				
City: State:	· · · · · · · · · · · · · · · · · · ·	Zipcode	a.	
Home Phone:	Cell:		·	
List any friends or relatives who are now (or have been) en		n & Sna	 ··	
			ı.	
WORK AVAILAI			1.0	
If offered a position with M. Salon & Spa, what date will you	J De avaliable to be	gin woi	K <u>?</u>	
Are there any days you are unable to work?				
To help us consider you for a job that matches your availability		ours you		
Mondayto			to	0
Tuesdayto	Friday		to	0
Wednesday to	Saturday		to	DC
Wednesday to EMPLOYMENT H	ISTORY			
LIST ALL CURRENT AND PRIOR EMPLOYMENT STAR	FING WITH YOUR MO	ST RECE	NT POSITI	ON:
Company Name:	Position:			
Address:		ment:	to	0
Supervisor:				
	Phone #:			
MAY WE CONTACT?	Yes		10	
Company Name:				<b></b>
Address:	Dates of employr			
Supervisor:				
Reason for Leaving:	Phone #:		<u> </u>	
MAY WE CONTACT?	Yes	N	10	
Company Name:	Position:			
Address:	Dates of employr	ment <sup>.</sup>	t(	 ∩
Supervisor				
Reason for Leaving	Odial y Phone #'	• • • • • • •	<del> </del>	• • • • • • • • • • • • • •
Reason for Leaving: MAY WE CONTACT? EDUCATION AND	Phone #: Yes	N	10	
EDUCATION AND	TRAINING			
CIRCLE HIGHEST YEAR				
HIGH SCHOOL: 9 10 11 12 COLLEGE	-	JR	SR	POST
List Schools, Career Training and/or Certifications:		013	U.V.	1001
REFERENC	ES			
(Please do not include relatives				
Name:	Relationship & Ye	ears Kno	own:	
Contact Info:	Occupation:			
Nomo	Polationshin & V	ooro Kno		
Name: Contact Info:	Relationship & Ye Occupation:	ears mic	WII	
APPLICANT'S STA				
		· . f	In string 1 was	
I hereby certify that the information contained in this application is true, complete falsification, omission or misrepresentation in this application may disqualify me to the second se				
discharge from employment. If hired, I agree to comply with the rules and regulat				
at-will basis, for no definite period of time, and can be terminated, with or without				-
myself.			,	• •
I HAVE READ THE ABOVE AGREEMENT AND CERT	IFICATION, AND FULL		RSTAND IT	Г.
Signature of Applicant:	Date:			