



# Altered Images Color Salon & Day Spa

## APPLICATION FOR EMPLOYMENT

Name: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

Address: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP)

Telephone No.: \_\_\_\_\_ Alternate No.: \_\_\_\_\_

Position Desired: \_\_\_\_\_ Full Time \_\_\_ Part Time \_\_\_ Temporary \_\_\_\_\_

Date Available: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

Are you legally eligible for employment in the United States? \_\_\_\_\_ Have you ever been convicted of a felony? \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If so, may we contact your present employer? \_\_\_\_\_

### EDUCATION

School	Name and Location	Dates Attended	Years Completed	Subjects Studied	Diploma or Degree Earned
High School					
College					
Trade, Business or Correspondence School					

Specialized training: \_\_\_\_\_

Are you willing to enter our training program (if needed)? \_\_\_\_\_

In what area do you most excel? \_\_\_\_\_

In what area do you least excel? \_\_\_\_\_

List other skills applicable to this position: \_\_\_\_\_

Have you ever worked for a Summit Salon? \_\_\_\_\_ If so, what salon? \_\_\_\_\_

**PREVIOUS EMPLOYMENT** (start with most recent)

Date (Month/Year)	Name and Address of Company	Supervisor's Name	Position Held	Weekly Salary	Reason for Leaving
From:					
To:					
From:					
To:					
From:					
To:					

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**REFERENCES** (Give the names of 3 persons not related to you whom you have known at least 2 years.)

Name and Phone No.	Address	Occupation	Years Known

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I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of information requested is grounds for dismissal. I further understand that my employment will be for no definite time period and may be terminated at any time without notice.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_