



725A Cornerstone Crossing
Waterford, WI 53185
534-HAIR (4247)

Personal Information

Name (first, last)

Date

Email Address

Address

City

State

Zip Code

Primary Telephone

Alternate Telephone

If employed, can you provide proof of U.S. citizenship? Yes

No

Are you 18 years of age or older?

Yes

No

Position(s) applying for

Starting Pay Desired?

Approximately how many hours per week are desired?

Referred by

Special education and/or skills

Education Record

High School

Graduate Year

Awards

College/Tech School

Dates Attended

Are you a Licensed Cosmetologist?

Yes

No

If yes, in which states are you licensed?

Do you have your Manager's License?

Yes

No

Additional Personal Information

Have you ever been convicted of a crime (other than traffic violations) or been imprisoned during the last seven years?

Yes

No

If yes, explain.

Do you have any physical or mental disability that may limit your performance in the job you are applying for?

Yes

No

If yes, explain.

Professional References

List three professional references who are familiar with the quality of your work, have worked directly with you, and have known you at least two years.

1) Reference _____	Phone _____
Business Name _____	Relationship _____
2) Reference _____	Phone _____
Business Name _____	Relationship _____
3) Reference _____	Phone _____
Business Name _____	Relationship _____

Employment History

1) Employer _____	Dates of Employment _____	
Telephone _____	Job Title _____	Starting Pay _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Ending Pay _____	
Why did you leave? _____		
2) Employer _____	Dates of Employment _____	
Telephone _____	Job Title _____	Starting Pay _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Ending Pay _____	
Why did you leave? _____		
3) Employer _____	Dates of Employment _____	
Telephone _____	Job Title _____	Starting Pay _____
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Ending Pay _____	
Why did you leave? _____		

Authorization

The information provided on this application is true to the best of my knowledge.

Signature

Date