

Par Exsalonce Salon/Spa Application for Employment

11849 College Boulevard, Overland Park, KS 66210 913.469.9532

Personal Information

Date: _____

Name: _____

Telephone No. _____

EMPLOYMENT DESIRED

FULL TIME / PART TIME (PLEASE CIRCLE ONE)

Position _____

Start Date _____

Salary Desired _____

Are you employed now? YES NO

If so, may we inquire of your present employer? YES NO

Have you applied to this company before?

Referred By: _____

Education	Name and location of school	# Of years attended	*Did you graduate/year?	Subjects studied
High School				
College				
Trade, Business or Correspondence School				
Advanced Education				

General

Subject of special study or research _____

Special Skills _____

Activities (civic, athletic, etc.)

Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, sex, age, marital status, color or nation of origin of its members.

U.S. Military or Naval Service? YES NO Rank

Present member of Guard or Reserve? YES NO

Former Employers (List below your last three employers beginning with your current/most recent one first.)

Date, Month, Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				

Which of these jobs did you like the best?

What did you like most about this job?

What days or hours would create a scheduling conflict for you?

Signature of Applicant

In case of emergency notify:

Name

Address

Phone Number

“I certify that all of the information submitted by me on this application is true and complete, and I understand that if any false information omissions, or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the company’s rules and regulations and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company’s option. I also understand that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president or vice president, and then only in writing signed by the president or vice president, agreement contrary to the foregoing.”

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

Interviewed By: _____

Date: _____

Hired YES NO

Position _____

Start Date _____

Notes (Remarks, Neatness and Ability)