

EMPLOYMENT APPLICATION

BATIK salon

860.648.2424

1004 Sullivan Avenue
South Windsor, CT 06074

www.batiksalon.com

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Please fill out both pages completely and return to BATIK Salon.

Name: _____

Current Address: _____

Previous Address: _____

Telephone Numbers: Home: _____ Work: _____ Cell: _____

Are you 18 or older? yes no

How long have you lived in Connecticut: _____

Have you applied to BATIK Salon before? yes no. If yes, when? _____

Are you acquainted with anyone who is or was employed by BATIK Salon: yes no

If yes, who: _____

How did you hear about BATIK Salon employment opportunities? _____

Why would you like to work for BATIK Salon? _____

What position are you applying for? _____

Are you applying for: full time part time

Are you available to work during the salon's hours of operation? yes no

If not, please explain. _____

If not, what hours can you work? _____ When can you start? _____

What are your reasonable earning goals? _____

What special qualifications or training do you have? _____

Do you possess a current cosmetologist license? yes no If yes, for how long? _____

If applying as a stylist, do you have a clientele? yes no

If so, approximately how many? _____

On the average, how many clients do you service in a day? _____

Have you ever been convicted of a crime (other than minor traffic violations)? yes no

If so, please explain. _____

Have you ever been discharged by an employer? yes no If yes, please explain. _____

Did you attend High School? yes no Did you graduate? yes no When _____

If not, years completed? 9 10 11 12 (circle one) Do you have a GED yes no

Did you attend college? yes no Did you graduate yes no When _____

If not, years completed 1 2 3 4 (circle one)

Where did you attend beauty school? _____

Did you graduate? yes no Graduation date _____

If not, hours/months completed _____

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EMPLOYMENT HISTORY:

(Please list employment history starting with the most recent. Please explain any gaps.)

	DATES: MONTH/YEAR	NAME/ADDRESS & TELEPHONE		POSITION	REASON FOR LEAVING
1.	FROM: TO:				
2.	FROM: TO:				
3.	FROM: TO:				
4.	FROM: TO:				

We may contact the employers listed above unless you indicate those you do not want us to contact.

Do not contact the employer number(s): _____ Reason: _____

REFERENCES:

NAME	ADDRESS/TELEPHONE	BUSINESS	YEARS ACQUAINTED

Give an example of when you have either given or received excellent customer service: _____

Other/Miscellaneous Information: _____

I hereby promise and affirm that the information provided on this employment application (and any accompanying resume or attachments, if any) is true and complete, and I understand that any false or misleading information or significant omissions may disqualify me from consideration for employment, and may lead to my dismissal from employment, if discovered at a later date.

Signed: _____ Date: _____