

**EMPLOYMENT APPLICATION
STYLIST**



Date.....

Position Desired.....

Full Time Part Time Temporary

CONTACT INFORMATION

Name.....
Last First Middle

Address.....
Street City State Zip

Telephone #..... Cell #..... Other #.....

Email Address..... Social Security #.....

PERSONAL INFORMATION

Date available to start.....

If employed, and you are under 18, can you furnish a work permit? Yes No

Can you work the regular hours/days/shifts of the job for which you are applying? Yes No

Can you work weekends? Yes No Can you work evenings? Yes No

Can you work overtime? Yes No

Have you ever been employed with Samuel Cole Salon? Yes No

Have you filled out an application here in the past? Yes No

Would coming in early or staying late present a problem for you? Yes No

Special Needs:HoursHolidaysInsuranceOther

Do you know any reason why you cannot perform the essential functions of the job for which you are applying, with or without reasonable accommodations? Yes No

If yes, please explain.....

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status may be required upon employment) Yes No

Have you been convicted of a felony within the last 7 years? (Conviction will not necessarily disqualify an applicant from employment) Yes No
If yes, please explain.....

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, sexual orientation, or the presence of a non-job-related medical condition or handicap.

I would specifically like to know about:

Education Benefits Vacation Advancement Other.....

Please rate your comfort level with each of the following services on a scale of 1-10.

1 = Least Comfortable and 10 = Most Comfortable

.....Scissor CuttingBalayage/HairUpdo/Formal
.....Razor CuttingPaintingStyling
.....ColoringBlow Drying	
.....FoilingMake Up	

Why do you want to work at Samuel Cole Salon?.....
.....
.....

Name three strengths that you would bring to Samuel Cole Salon.....
.....
.....

Name three areas that you would like to improve upon (may be unrelated to your craft).....
.....
.....

What kind of work environment do you thrive in?.....
.....
.....

Describe the perfect leader.....
.....
.....

What do you expect to get out of working here, and what can we expect to get out of you?.....
.....
.....

How do you feel about assisting?.....
.....
.....

Describe what teamwork means to you.....
.....
.....

Tell me how education plays into fulfilling your career goals.....

.....
.....
Tell me about a time that you've had a client who was consistently late for their appointment. How did you address this challenge?.....
.....
.....

Give examples of when you have received good customer service and/or bad and how did you respond/resolve it?.....
.....
.....

What do you do when there is a disconnect in communication with the client?.....
.....
.....

TRAINING AND EMPLOYMENT

Cosmetology License Number.....Date of Issue.....

Do you have a NC License?.....

If no, list licensing in other States/Countries.....

Name and Address of Beauty School

Dates Attended

When was the last class you attended?.....

What class was it?.....

Years of Experience.....Areas of Specialization.....

Other training , skills, and aptitudes that you feel qualify you for this position at Samuel Cole Salon.....

Have you regularly attended any manufacturers' clinics/seminars? Yes No

If yes, please list.....
.....

Are you currently employed?..... If yes, where?.....

May we contact your present employer?.....

Present employer's contact information.....

Briefly state why you desire to make a change in employment, if applicable.....
.....
.....

Have you ever held a position of trust (handling money or confidential Yes No

material)?

If yes, please specify.....

Please list your previous employers (most current first):

1. Name.....
Address.....Telephone.....
Employed from/to.....
Salary start/final.....
Position.....
Supervisor's Name.....
Reason for leaving.....
2. Name.....
Address.....Telephone.....
Employed from/to.....
Salary start/final.....
Position.....
Supervisor's Name.....
Reason for leaving.....
3. Name.....
Address.....Telephone.....
Employed from/to.....
Salary start/final.....
Position.....
Supervisor's Name.....
Reason for leaving.....

REFERENCES

1. Name.....
Address.....Telephone.....
Relationship.....
How long have you known this person?.....
2. Name.....
Address.....Telephone.....
Relationship.....
How long have you known this person?.....
3. Name.....
Address.....Telephone.....
Relationship.....
How long have you known this person?.....

Referral Source

Friend (Please Name):.....
Relative (Please Name):.....
Other (Please Explain):.....
Other Website(Please Name):.....

Our Website:.....
Advertisement:.....
Walk In:.....
Employment Agency:.....

CERTIFICATION AND AGREEMENT

Please read the following statements carefully before signing. If you have any questions regarding these conditions of employment, please ask them of the employment interviewer before signing.

- (A) This application will be given every consideration, but its receipt does not imply that I will be employed.
- (B) I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and Samuel Cole Salon. In addition, I understand and agree that if I am employed, my employment is for no definite term or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or Samuel Cole Salon, and that no promises or representations contrary to the foregoing are binding on Samuel Cole Salon unless made in writing and signed by me and the owner(s).
- (C) I hereby authorize Samuel Cole Salon to investigate thoroughly my references, work record, education, and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to Samuel Cole Salon any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Samuel Cole Salon, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
- (D) Should I be employed, I agree to read my Employee Handbook and sign an acknowledgement of receipt and understanding of the Employee Handbook. In addition, I will abide by Samuel Cole Salon policies and procedures during my employment, if hired. I fully understand that all information, whether written, spoken or otherwise communicated or obtained, and all files and records relating to the business of Samuel Cole Salon or to anyone with whom Samuel Cole Salon has dealings, constitute privileged information and are to be treated in a strictly confidential manner. I fully understand and agree that should I be employed, I am not to, and will not at any time, communicate or reveal any business of Samuel Cole Salon or any such information, records, files, or the matters contained therein to unauthorized personnel within Samuel Cole Salon or to anyone outside Samuel Cole Salon. I also understand any violation of the foregoing may result in disciplinary action, including termination of employment.
- (E) I fully understand that Samuel Cole Salon employs only U.S. citizens and properly authorized aliens, and that should I become employed, federal law requires me to furnish to Samuel Cole Salon proof of my identity and employment authorization, and to sign a statement under penalty of perjury verifying my eligibility for employment as a citizen or national of the United States or an otherwise employable alien.

I CERTIFY THAT ALL STATEMENTS MADE BY ME ON THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I HAVE WITHHELD NOTHING THAT WOULD, IF DISCLOSED, AFFECT THIS APPLICATION UNFAVORABLY. I HEREBY ACKNOWLEDGE THAT I HAVE READ THE ABOVE CERTIFICATION AND AGREEMENT STATEMENTS AND UNDERSTAND THE SAME. I UNDERSTAND THAT ANY MISREPRESENTATION OR OMISSION OF FACT IN THIS APPLICATION OR THE HIRING PROCESS WILL BE CAUSE FOR REFUSAL OF EMPLOYMENT OR, IF EMPLOYED, TERMINATION FROM SAMUEL COLE SALON.

Applicant Signature.....Date.....