

Perry Anthony Salon & Spa Network

5331 Limestone Road Wilmington DE 19808 (302) 239-6161

Employment Application

Position applied for _____ Date of application _____
Home phone _____ Cell phone _____ Referred by _____
Are you authorized to work in the U.S.? _____ Yes _____ No

Personal

Name (please print): Last _____ First _____ Middle _____
Address _____ City _____ State _____ Zip _____
Any friends or relatives at Perry Anthony Salon & Spa Network? _____ YES _____ NO
If Yes, please list name(s) _____
Have you previously applied for a position with the company? _____ YES _____ NO
If yes, when? _____
Have you ever been employed by this company? _____ YES _____ NO
If yes, please provide termination date: _____
Do you have a driver's license? _____ YES _____ NO
What is your means of transportation to work? _____
Have you had any accidents during the past three years? _____ YES _____ NO How many? _____
Have you had any moving violations during the past three years? _____ YES _____ NO How many? _____
Please list two references other than relatives or previous employers:
Name _____ Name _____
Position _____ Position _____
Company _____ Company _____
Address _____ Address _____

Telephone _____ Telephone _____

Employment History

List below, beginning with the most recent job. Include all past and present employment (use separate sheet if necessary). Include summer or part time employment. For any gaps in employment, please explain (attended school, etc.)

1. Company Name: _____ Address: _____
Dates of employment (month and year) From _____ To _____
Salary _____ Hourly _____ Weekly _____ Annually (circle one)
Job title and brief description of responsibilities _____

Name, title and phone number of immediate supervisor _____
Reason for leaving _____

2. Company Name: _____ Address: _____
Dates of employment (month and year) From _____ To _____
Salary _____ Hourly _____ Weekly _____ Annually (circle one)
Job title and brief description of responsibilities _____

Name, title and phone number of immediate supervisor _____
Reason for leaving _____

3. Company Name: _____ Address: _____

Perry Anthony Salon & Spa Network

Dates of employment (month and year) From _____ To _____
Salary _____ Hourly _____ Weekly _____ Annually (circle one)
Job title and brief description of responsibilities _____

Name, title and phone number of immediate supervisor _____
Reason for leaving _____

Indicate total number of full-time jobs held since leaving school (exclude military services): _____
Are you currently employed? _____ YES _____ NO
If so, may we contact your present employer? _____ YES _____ NO

Military

Have you ever been in the Armed Forces: _____ YES _____ NO
Date entered: _____ Date separated/discharged _____
Do the conditions of your discharge require rank when separated/discharged? _____ YES _____ NO
If yes, when will this obligation be completed? _____

Other

Describe briefly type of work desired and state reason for wanting to work here:

Do you wish employment Full Time _____ Part Time _____
Date available for employment _____
Specify days and hours available if part time _____

Education

Circle most recent year completed

Grade, Trade or High School
1 2 3 4 5 6 7 8 9 10 11 12

Technical, Business, College
1 2 3 4 5

Beginning with most recent, list every high school, business, trade school or college attended except Cosmetology School.

School _____ Address _____
Major Subjects _____ Diploma or Degree received _____
Class rank or final average _____

School _____ Address _____
Major Subjects _____ Diploma or Degree received _____
Class rank or final average _____

School _____ Address _____
Major Subjects _____ Diploma or Degree received _____
Class rank or final average _____

Cosmetology Study

Perry Anthony Salon & Spa Network

Name and address of Cosmetology School attended _____

Dates attended: From _____ To _____

License held (Cosmetology, etc.) _____

State _____ Expiration Date _____

Name and address of Cosmetology School attended _____

Dates attended: From _____ To _____

License held _____

State _____ Expiration date _____

Other cosmetology training completed:

Skills

Please place a check mark (v) in the appropriate box:

<i>Styling Skills</i>	<i>Skilled In</i>	<i>Advanced Training</i>	<i>Styling Skills</i>	<i>Skilled In</i>	<i>Advanced Training</i>
Haircutting			Styling Techniques		
Razor Cutting			Wet & Dry Roller Setting		
Scissor Cutting			Formal (Up) Styling		
Clipper Cutting			Styling with backcombing		
Other			Blow Drying with round brush		
Coloring			Special Skills		
Single Process			Electric Rollers		
Double Process			Curling Iron		
Color Correction			Flat Iron		
Highlighting – Foil			Facial (skin care)		
Highlighting – Cap			Makeup		
Permanent Waving			Skills not mentioned above		
Conventional Wrap (9 sections)			Manicuring		
Spiral Wrap			Pedicuring		
Piggy Back			Electrolysis		
Brick			Massage		
Oval			Reflexology		

Perry Anthony Salon & Spa Network

Conventional					
Paul Brown					
Keratin					
Other					
Management Skills			Management Skills (cont'd)		
Advertising			Payroll		
Bookkeeping			Platform Work		
Booking Appointments			Promotions		
Cash Register			Recruiting		
Merchandising			Training		
Ordering Supplies			Other (please specify)		

Medical

Do you have any medical problem or physical condition which affects your ability to perform the job for which you applied? _____ Yes _____ No

Emergency Contact

Person to be notified in case of accident or emergency:

Name _____ Relationship _____ Phone _____
 Address _____ City _____ State _____ Zip _____

Certification

It is understood that all information in this application is furnished for the purpose of gaining employment. It is accurate and complete and shall be held in strict confidence. It is further understood that any misleading or incorrect information may be cause for dismissal in the event of my employment. I hereby give permission to Perry Anthony Salon & Spa Network or its agent to contact any of the persons or organizations listed, except for my present employer to verify the information given and/or as a reference. I understand that either the company or I shall have the right to terminate the employment relationship at any time with reasonable notice to the other.

Federal and/or state laws prohibit discrimination in employment on the basis of race, color, creed, national origin, sex, age, marital status, disability or sexual orientation.

Signature _____ Date _____

Starting salary/commission expected _____