

# Employee Application Form

*This Information is Private & Confidential!*

Please answer each **question** completely—and as honestly as possible—so we may support you fully in achieving personal fulfillment, as well as professional and financial success.

Today's Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Current Name of Salon or Spa where you work: \_\_\_\_\_

Work Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Position or Title: \_\_\_\_\_

Work Number: \_\_\_\_\_ Home Number: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Number of Years in the Industry: \_\_\_\_\_ Number of Years at current Salon / Spa: \_\_\_\_\_

Tell me about your *background* in this Industry. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you want from your next job that you're not getting now? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What is most important to you in your next job? What expectations do you have? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why did you apply for this position? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are three goals you have for your business over the next 12-months?  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

How do you plan to reach these goals? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where would you like to be in 5 years? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What works to motivate you? \_\_\_\_\_  
\_\_\_\_\_

What were your reasons for leaving your last job? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What did you *like best* about your last job? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What *three things* drove you crazy in your last job?  
1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

What do you *most want* to get out of working at our Salon / Spa? \_\_\_\_\_  
\_\_\_\_\_

How will I know if our place of business is *working for you*? \_\_\_\_\_  
\_\_\_\_\_

How will I know if you are *stuck*? \_\_\_\_\_  
\_\_\_\_\_

Do you have reliable transportation? \_\_\_\_\_

How were you paid in last or current job? *Check appropriate one:*

Commission: \_\_\_\_\_ (If so, what % are you paid? \_\_\_\_\_ %) Booth Rental: \_\_\_\_\_  
(How much in rent do you pay?) \_\_\_\_\_ Salary: What is the salary? \_\_\_\_\_

How many *days* and *hours* do you currently work per week? \_\_\_\_\_

How many *days* and *hours* would you like to work per week? \_\_\_\_\_

What are your average weekly *service* sales? \$ \_\_\_\_\_

What are your average weekly *retail* sales? \$ \_\_\_\_\_

What is your average weekly *Client count*? \_\_\_\_\_

What is your current *fee* for the following? Haircut: Men \$ \_\_\_\_\_ Women: \$ \_\_\_\_\_  
Manicure: \$ \_\_\_\_\_ Facial: \$ \_\_\_\_\_ Massage: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

What *percent* of your business would you say is: Haircuts \_\_\_\_\_ Chemical \_\_\_\_\_

What method of *tracking* do you use for your business? (*Check appropriate item*)

Computer: \_\_\_\_\_ Manual Client Cards: \_\_\_\_\_ Memory: \_\_\_\_\_ No System: \_\_\_\_\_

Do you do any of the following? (*Check the appropriate items*) Newsletter: \_\_\_\_\_ (How often?)

New Client Follow-Up Call or Letter: \_\_\_\_\_ Birthday Cards: \_\_\_\_\_ Holiday Cards: \_\_\_\_\_

Confirmation Calls: \_\_\_\_\_ If so, how soon before the appt. do you make the Call? \_\_\_\_\_

What do you **need** to earn? \$ \_\_\_\_\_ What do you **want** to earn? \$ \_\_\_\_\_

What *retail lines* do you currently sell? \_\_\_\_\_

What *motivates* you to support these lines? \_\_\_\_\_

What do you currently do to *market* your business? \_\_\_\_\_

Who is your **most** favorite Client and why? \_\_\_\_\_

Who is your **least** favorite Client and why? \_\_\_\_\_

Why would a client select you over another technician? What makes you special? \_\_\_\_\_

\_\_\_\_\_

How would you deliver extraordinary service? \_\_\_\_\_

\_\_\_\_\_

What are *three things* you most want to accomplish in your lifetime? \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

If you could travel **anywhere** where would you want to go? \_\_\_\_\_

\_\_\_\_\_

If money was not an issue, and fear was not present, *what would you dare to do?* \_\_\_\_\_

\_\_\_\_\_

What would stop you from doing it? \_\_\_\_\_

\_\_\_\_\_

What would motivate you to do it anyway? \_\_\_\_\_

\_\_\_\_\_

Referral Source: \_\_\_\_\_ Advertisement \_\_\_\_\_ Employee ( \_\_\_\_\_ )  
\_\_\_\_\_ Walk-in \_\_\_\_\_ Other

Are you less than 18 years of age? . . . . . \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, can you furnish proof of age and a work permit if you are employed? . . . . . \_\_\_\_\_ yes \_\_\_\_\_ no

Have you ever been employed here before? . . . . . \_\_\_\_\_ yes \_\_\_\_\_ no

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status? . . . . . \_\_\_\_\_ yes \_\_\_\_\_ no

Do you have any physical, mental, or medical impairment or disabilities that would limit your job performance for the position for which you are applying? . . . . . \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT EXPERIENCE

(List previous employment in most recent order)

Employer	Telephone	Dates Employed		Work Performed:  _____  _____  _____
		From	To	
Address				
Job Title				
Reason for Leaving				
What Were You Paid?	Supervisor			

Employer	Telephone	Dates Employed		Work Performed:  _____  _____  _____
		From	To	
Address				
Job Title				
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Employer	Telephone	Dates Employed		Work Performed:  _____  _____  _____
		From	To	
Address				
Job Title				
Reason for Leaving				
What Were You Paid?	Supervisor			

FOR PERSONNEL DEPARTMENT USE ONLY

Interviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hired: \_\_\_\_yes \_\_\_\_no Position: \_\_\_\_\_

Salary/Wage: \_\_\_\_\_ Date Reporting for Work: \_\_\_\_\_

Approved by: \_\_\_\_\_  
(Name) (Title) (Date)

	Name and Location of School	Number of Years*	Did You Graduate?	Subjects
High School				
Barber or Cosmetology School				
College				
Trade, Business, Correspondence School				

\*The Age Discrimination in the Employment Act of 1967 prohibits discrimination on the basis of age with the respect to individuals who are at least 40 but less than 70 years of age.

License (specify) and Number: \_\_\_\_\_  
 (Master, Apprentice, Beautician, Manager Operator)

State From Which License Was Obtained: \_\_\_\_\_ Year Obtained: \_\_\_\_\_

I hereby certify that the information I have provided in this application is true and complete to the best of my knowledge and agree that false or misleading information or significant omissions in my application or interviews may disqualify me from further consideration for employment and may be considered just ground for discharge if discovered at a later date.

I hereby authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that I am required to abide by all rules and regulations of the Company.

I also understand and agree that if hired, I am an employee at will and that I may be terminated at any time without prior notice.

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Date)