

APPLICATION FOR EMPLOYMENT

Loveland, OH 45140 Phone: (513) 683-4247
Email: Harjadauen@gmail.com

Harja Dauen Salon

PERSONAL INFORMATION

Date: _____
Name: _____ Phone Number: _____
Address: _____
Street City State Zip
Email Address: _____ Are you 18 years or older? Yes () No ()
Are you either a u.s. citizen or an alien authorized to work in the united states? Yes () No ()
Desired Position: _____ Desired Start Date: _____ Desired Salary: _____
How did you hear about this position? _____

EDUCATION

	Name And Location Of School	Year Graduated	Degree Earned
High School			
College			
Trade, Business Or Correspondence School			

GENERAL

Number of years in the industry: _____ Number of years at current salon/spa: _____

Please list below other skills and qualifications you possess for the position for which you are applying:

PREVIOUS EMPLOYMENT

Date Month And Year	Name, Phone Number And Address Of Employer	Salary	Position	Reason For Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				

REFERENCES

Please provide 3 personal and professional reference(s) below:

Name	Phone Number	Business	Years Acquainted
1.			
2.			
3.			