

# CACTUS SALON

Application



APPLICANT INFORMATION										
Last Name				First Name			M.I.	Date		
Street Address							Apartment/Unit #			
City			State			ZIP				
Home Phone			E-mail Address							
Cell Phone			D.O.B (mm/dd/yyyy)				Starting Salary:			
Date Available			Social Security No.							
Position Applied for					P/T or F/T?					
Are you a citizen of the United States?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>		NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when and where?				
Have you ever been convicted of a felony?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain				
Do you have a valid NYS Cosmetology license?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, explain				
What year did you obtain your NYS license?						How did you find out about Cactus?				
Do you have a clientele to follow you?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, what is the dollar amount?				

HOURS AVAILABLE													
MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	
AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM

Which location(s) are you interested in?

EDUCATION									
What level(s) of education have you completed?									
GED Program <input type="checkbox"/>			High School Diploma <input type="checkbox"/>			Associates Degree <input type="checkbox"/>			
Bachelors Degree <input type="checkbox"/>			Masters Degree <input type="checkbox"/>			Other _____			

PREVIOUS EMPLOYMENT									
Company					Phone ( )				
Address					Supervisor				
Job Title			Starting Salary \$			Ending Salary \$			
Responsibilities									
Start Date		End Date		Reason for Leaving					

May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> Reason if no:			
Company		Phone	(    )
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
Start Date	End Date	Reason for Leaving	
May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> Reason if no:			
<b>DISCLAIMER AND SIGNATURE</b>			
I certify that my answers are true and complete to the best of my knowledge.			
If this application leads to employment, I understand that false or misleading information in my application or interview may result in termination. I authorize and consent Cactus Salon to do a criminal background check.			
Signature:			Date
<b>OFFICE USE ONLY</b>			
Salon Location Hired:		Date Hired:	
Salary Offered:		F/T or P/T?	
Extra Comments:			
Six Month Review:			