

EMPLOYMENT APPLICATION

/_____

date

Full name: _____

Email: _____ Address: _____

Phone number: _____ City/ State/ _____
Zip: _____

Applying for:

- 50/50 commission based Master Hairstylist
- Independent Booth renter

Desired start date: _____

Full time Part time

Are you legally allowed to work in the _____ US?

Education

School: _____ Location: _____

Graduation date: _____

Do you have a valid Florida Cosmetology license? _____

Professional References

Name: _____ Company: _____ Phone: _____

Name: _____ Company: _____ Phone: _____

Name: _____ Company: _____ Phone: _____

I certify that all answers and statements on this application are true and complete to the best of my knowledge

Date: _____ Signature _____