

Please fill out the application in its entirety



Application for Employment

Please fill out the information below and email or bring it to the salon. Thank you in advance for helping us get to know you better.

Full Name: _____ Date of Birth: ____/____/____
Last First MI Day Month Year

Current Address: _____
Street Address Apartment/Unit #

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Emergency contact: _____ Phone: _____ Relationship: _____

Social Security #: _____ - _____ - _____ Position Applied for: _____

Date available to start: _____ Do you have a reliable method of transportation to arrive to work? YES NO

What are your available days and hours to work?

M _____ T _____ W _____ TH _____ F _____ S _____

Are you a U.S. Citizen? YES NO (circle one)

If no, are you authorized to work in the U.S.? YES NO (circle one)

Have you ever been convicted of a felony? YES NO (circle one) If yes, please explain below:

Education and Experience

High School: _____ Location: _____

From: _____ To: _____ Did you graduate? YES NO (circle one) If yes, when? _____
mo/yr mo/yr mo/yr

College: _____ Location: _____

From: _____ To: _____ Did you graduate? YES NO (circle one) If yes, when? _____
mo/yr mo/yr mo/yr

Major: _____ Degree: _____

Do you have a GED? YES NO (circle one) If yes, when? _____
mo/yr

Did you attend Cosmetology school? YES NO (circle one) If yes, where? _____

Name/Location

Did you graduate? YES NO (circle one) If yes, when? _____

Did you take the state board exam? YES NO (circle one) Did you pass and obtain your license? YES NO
(circle one)

License # and state: _____ Expiration Date: _____

Please answer the following questions based on your experiences in the beauty industry:

I am competent to work in the areas checked:

- | | |
|---------------------------------|-----------------------------------|
| _____ Hair cutting | _____ Blow Drying |
| _____ Permanent waving | _____ Curling Iron / Straightener |
| _____ Relaxer application | _____ Trichology |
| _____ Color Application | _____ Roller setting |
| _____ Foil highlighting | _____ Manicure/Pedicure |
| _____ Sew-In Extensions | _____ Eye Brow shaping |
| _____ Flat Iron/Ceramic Iron | _____ Make-up Application |
| _____ Braids | _____ Waxing |
| _____ Formal Styles/Up-Do's | _____ Natural Hair Styling |
| _____ Bonding (hair extensions) | _____ Wig styling |

Advanced Training—List specialized or advanced training that you have received within the beauty industry:

Have you ever participated in any beauty/styling competitions or received any awards pertaining to the beauty industry?

YES NO (circle one) If yes, please list below:

Please tell us about the color or product lines you are familiar with:

Cosmetology/Professional References:

	Name	Phone Number	Years Known/Relationship
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Why did you choose to apply at Genesis Hair Art?

Do you currently have any salon experience? Please explain:

Do you consider yourself a leader or a follower? Please explain:

Are you employed now? If yes, why do you want to leave that position?

If hired, what would you hope to gain from working at Genesis Hair Art? What are your goals in the beauty industry?

How many guests do you think you can bring in weekly on your own?

Our salon is built on VOLUME & PERFORMANCE.

What was your performance in school? Average Service dollar/guest?

Obviously you would like to join our team, why should you be our first choice?

What are your professional and/or future goals and how would you be an asset to the Genesis Hair Art team:

Work Experience	(Most Recent First)	(Include military experience)
Employer	Telephone Number () -	From (Month/Year)
Address		
Job Title	Hours Per Week	To (Month/Year)
Specific Duties		Starting Salary
		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	
Employer	Telephone Number () -	From (Month/Year)
Address		
Job Title	Hours Per Week	To (Month/Year)
Specific Duties		Starting Salary

		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	
Employer	Telephone Number () -	From (Month/Year)
Address		
Job Title	Hours Per Week	To (Month/Year)
Specific Duties		Starting Salary
		Last Salary
		Supervisor
Reason For Leaving	May We Contact This Employer? Yes No	

Important: Please read the following statements carefully before you sign and return this application

I understand that this application is not a contract, offer or promise of employment. Likewise, Genesis Hair art can terminate my employment at any time with or without cause. Furthermore I understand that no person other than the president of Genesis Hair Art has the authority to enter into an employment contract with me and that any exception to my at-will relationship must be evidence by a written agreement by me and the President of Genesis Hair Art.

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and any included resume, if any) to provide any relevant information that may be required to arrive at an employment decision.

I hereby affirm that the information provided on this application is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

EMAIL TO Genesishairart@att.net or fax to 404-768-3003

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Comments:

1st Interview Date: _____ Interviewed by: _____

2nd Interview Date: _____ Interviewed by: _____

New Hire Date: _____ Start Date: _____