

DANIEL'S SALON & STUDIO

296 W. Tienken Rd. / Rochester Hills, MI 48306 / 248.656.8608

daniel@rochesterhairsalonandspa.com / FAX: 248.656.1225

All applications must be accompanied with a current resume to move forward with the interview process. All applications are confidential. All applicants will be contacted via email. If you do not have an email address, please write N/A next to email address line below.

Team Member Application

Instructions: Please print clearly in black or blue ink. Make sure to answer all questions. Sign and date the last page of the application and attach resume.

Personal Information:

First name _____

Last name _____

Street Address _____

City, State, Zip Code _____

Home phone _____

Cell phone _____

Email _____

Cosmetology license # _____ Date of Issue _____

Are you eligible to work in the United States? Yes _____ No _____

Have you been convicted of or pleaded no contest to a felony in the last five years? Yes _____ No _____

If yes, please explain:

Position Applying for: _____

Days/Hours Available From and To:

Monday _____

Tuesday _____
Wednesday _____
Thursday _____
Friday _____
Saturday _____
Sunday _____
What date are you available to start work? _____

Education:

Name and Address of School – Degree/Diploma – Graduation Date

Skills and Qualifications: Licenses, Skills, Training, Awards

Employment History:

Are you currently employed? _____

Present or Last position:

Employer: _____

Manager: _____

Address: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities:

Salary/Commission:
\$ _____

Reason for Leaving:

Previous Position:

Employer: _____

Manager: _____

Address: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities:

Salary/Commission:

\$ _____

Reason for Leaving:

Previous Position:

Employer: _____

Manager: _____

Address: _____

Phone: _____

Email: _____

Position Title: _____

From: _____ To: _____

Responsibilities:

Salary/Commission:

\$ _____

Reason for Leaving:

May We Contact Your Previous Employers? Yes _____ No _____

Referral Source

3 Business References:

Name/ Title Address Phone

Why do you want to work at Daniel's Salon & Studio?

Name three strengths that you would bring to Daniel's Salon & Studio.

What kind of work environment do you thrive in?

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature: _____

Date: _____

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, sexual orientation, or the presence of a non-job-related medical condition or handicap.