



## ***Employee Application Form***

*(This Application is private and confidential)*

***Please answer each question completely and as honestly as possible so we may support you fully in achieving personal fulfillment as well as professional and financial success.***

***Email or hand deliver the application to the salon.***

*\*Place a N/A when questions do not apply to you*

Today's Date: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yyyy)

Social Security #: \_\_\_\_-\_\_\_\_-\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Date available to start: \_\_\_\_\_

Do you have a reliable method of transportation to arrive to work? YES NO (circle one)

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:

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***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: \_\_\_\_\_

# *The* Gresham Giles E X P E R I E N C E

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:

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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:

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

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*Personal Analysis*

What made you decide to apply at Gresham Giles Salon?

What do you Expect from Gresham Giles Salon?

What do you currently do to market yourself/business?

How many new clients can you bring in weekly on your own?

What do you believe are your Top three strengths?

- 1.
- 2.
- 3.

What do you believe are your Top three areas to improve?

- 1.
- 2.
- 3.

# *The* Gresham Giles E X P E R I E N C E

What are three goals you have for your career over the next 12-months?

1.

2.

3.

How do you plan to reach these goals?

Where would you like to be in 5 years?

What works to motivate you?

What did you like best about your last or current job?

What did you NOT like about your last or current job?

What were your reasons for leaving your last job?

How will I know if Gresham Giles Salon is/is not working for you?



How will I know if you are stuck?

How would you deliver extraordinary service?

What are three things you want to accomplish in your lifetime?

1.

2.

3.

How do you see yourself contributing to the growth of our company?

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



***EMPLOYMENT EXPERIENCE***

List all employers for the last five years, beginning with the most current, including periods of unemployment. If you need additional space, please continue on a separate sheet of paper or attach a resume.

Employer:

Phone:

Duties:

Dates Employed:

Address:

From:

To:

Job Title:

Supervisor May we contact?

Reason for Leaving:

Employer:

Duties:

Dates Employed:

Address:

From:

To:

Job Title:

Supervisor May we contact?

Reason for Leaving:

*(If more employers, reprint this page only)*



***Cosmetology/Professional References:***

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

**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, Gresham Giles Salon can terminate my employment at any time with or without cause. Furthermore, I understand that no person other than the president of Gresham Giles Salon 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 Gresham Giles Salon.

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 later.

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 [greshamgilessalon@gmail.com](mailto:greshamgilessalon@gmail.com)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



*The* Gresham Giles  
E X P E R I E N C E

**FOR OFFICE USE ONLY:** Comments:

1st Interview Date: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

2nd Interview Date: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

New Hire Date: \_\_\_\_\_ Start Date: \_\_\_\_\_