

An Equal Opportunity Employer Employment Application Non-CA

Applying for: Customer Care St	ylist 🗌 Aesth	etician 🗌 N	lassage 🗌 A	ssistant	
PERSONAL INFORMATION					
Name			Social Securi	ity#	
Present Address	Telephone #	£	Work #		
Permanent Address	Email Address:				
Are you at least 18 yrs. of age? Yes N	lo Are you	eligible to v	vork in the U.S	S.? No	
If hired, you will be required to provide probeginning employment (The Immigration F				d States prior to	
How were you referred to us? Please be			/		
Have you ever been convicted of a crime? If yes, please give the nature of the offens conviction record will not necessarily disqu	Yes No e, the day, the	e court, and	the sentence	imposed. A	
Position For Which You are Applying	Salary Requ	irement	Date Av	Date Available	
☐ Full-Time ☐ Part-Time ☐ Seasonal					
AVAILABILITY					
	ues Wed	Thurs	Fri	Sat	
From					
То					
Are you willing to work overtime, when and required? Yes No	d as Tota	Hours Ava	ilable Per We	ek:	



EDUCATION

Education	N	Name of School		City & State		# Years Completed/Degree
High School						2 2
College						
Additional College/Training	1					
U.S. Military Service	e From		То			eive a dishonorable
A dishonorable disc	charge will r	ot necess	arily disqu	alify you f		
EMPLOYMENT HIS	TORY					
essentials, Bumble Malone, La Mer, MA Toiletries? Yes No If you Have you ever appl	& bumble, (AC, Origins,	Clinique, D Prescripti explain who	onna Kara ves, Stila, en & wher e compani	an Cosme Tommy H e: ies?	tics, Estee La	
Tes No II y	es, piease e	xpiairi writ	en a wner	с.		
Have you ever beer agreement from any						
Please complete eve	n if attachin	ıg resume.	Is resume	e attached	l? ☐ Yes ☐ N	lo
) Name of I	Employer (Zip (4) Telephone #
Present/Last Employer 1st	Dates	Salary		lature of V upervisor's		Reason for Leaving
1.	From MO./YR.	Starting				
3. 4.	To MO./YR.	Leaving				



ENTER ON LINE (1) Name of Employer (2) Street Address (3) City/State/Zip (4) Telephone #				
Present/Last	Dates	Salary	Nature of Work &	Reason for Leaving
Employer 1st		01 1	Supervisor's Name	
1.	From MO./YR.	Starting		
2.	IVIO./TIX.			
3.	To MO./YR.	Leaving		
4.				
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ENTER ON LINE (* Present/Last	Dates		 Street Address (3) City/State/Zip Nature of Work & 	
Employer 1st	Dates	Salary	Supervisor's Name	Reason for Leaving
1.	From	Starting	caperrises e riame	
	MO./YR.			
2.				
3.	То	Leaving		
	MO./YR.			
4.				
STYLIST EDUCATION	ON / TRAIN	ING / APPR	PENTICESHIP	
STYLIST EDUCATION	ON / TRAIN	ING / APPR	RENTICESHIP	
Education	ON / TRAIN	Name	City & State	# Years Completed/Degree
Education Cosmetology/Bark			City & State	
Education			City & State	
Education Cosmetology/Bark School	per		City & State	
Education Cosmetology/Bark	per		City & State	
Cosmetology/Bark School	per		City & State	
Education Cosmetology/Bark School Additional Trainin	per ng	Name	City & State	Completed/Degree
Education Cosmetology/Bark School	oer ng Yes No	Name In what S	City & State	Completed/Degree
Education Cosmetology/Bark School Additional Trainin Licensed Stylist?	oer Tyes No Tyes Yes	Name In what S	City & State	Completed/Degree
Education Cosmetology/Bark School Additional Trainin Licensed Stylist? [Licensed Estheticia Do you do color? [oer Yes No Yes No Yes No	Name In what S	City & State	Completed/Degree
Education Cosmetology/Bark School Additional Trainin Licensed Stylist? [Licensed Estheticia Do you do color? [oer Yes No Yes No Yes No	Name In what S	City & State	Completed/Degree
Education Cosmetology/Bark School Additional Trainin Licensed Stylist? [Licensed Estheticia Do you do color? [Do you have exper	oer Yes No No Yes No Yes No ience with E	In what S No thnic Hair?[City & State State? Yes No If so, please explai	Completed/Degree
Education Cosmetology/Bark School Additional Trainin Licensed Stylist? [Licensed Estheticia Do you do color? [Do you have experi	oer Yes No No Yes No Yes No ience with E	In what S No thnic Hair?[City & State State? Yes No If so, please explai	Completed/Degree
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Education Cosmetology/Bark School Additional Trainin Licensed Stylist? [Licensed Estheticia Do you do color? [Do you have experi	oer OYES No In? Yes Yes No ience with E Io: Men's der your spe	In what S No thnic Hair?[City & State State? Yes No If so, please explai	n:
Education Cosmetology/Bark School Additional Trainin Licensed Stylist? [Licensed Estheticia Do you do color? [Do you have experi	oer OYES No In? Yes Yes No ience with E Io: Men's der your spe	In what S No thnic Hair?[Woman	City & State State? Yes No If so, please explain's	n:



PROFESSIONAL REFERENCES

(Please list 3 non-relatives, i.e. professors, previous employers, etc.)

Name	Phone	Job Title/Nature of Association	# Years Acquainted

Please read carefully. If you have any questions regarding this section, please consult a Human Resource Representative before signing.

I declare that the information contained in this application for employment and any attached information is true and complete. I understand that any false statement or the omission of relevant information (including any contained on my resume if I have provided one) may disqualify me from employment or cause my dismissal.

I understand that the employment for which I am applying may be terminated at any time with or without cause, and with or without notice, either by myself or any affiliates of Salon Ethos.

I authorize the educational establishments and employers referenced in this application, as well as all other references contacted by Salon Ethos or any of its affiliates in connection with this employment application, to release to Salon Ethos or any affiliate thereof to which I have applied or by which I am employed, any information concerning my educational record, my employment, or any other information relevant to my employment. I hereby release all such persons and entities from any liability arising out of the release of such information.

Date:	Signature:
Date	Oignature

Employment Application Check List

- Sign Application
- Attach Resume
- Attach Photo (optional)
- Attach e-Portfolio Link

Submitting Application:

Email: <u>careers@EthosAveda.com</u>, include position in subject line.

Fax: 636-227-1978, ATTN: Salon Ethos

Mail: Salon Ethos 173 Carondelet Plaza Clayton, MO 63144

Office Use Only	
Interview date:	Interviewer(s):
Comments:	