



La Mirage

Employment Application - Internet Version

Position Desired _____

Application Date _____

Personal Information

Name: _____

Home Phone: _____

Address: _____

Cell Phone: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Social Security Number: _____

Presently employed: Yes No Pay Desired: _____

Employment Type Desired:

- Full time
- Part time
- Temporary
- Internship
- Seasonal (summer/holidays)

Date Available: _____

Are you 18 years of age or older?

- Yes
- No

If under age 18, do you have a work permit?

- Yes
- No

Can you submit verification of your identity and legal right to work in the United States?

- Yes
- No

What prompted you to apply at La Mirage Hair & Day Spa?

Advertisement

Referral: _____

Agency

Other: _____

Have you applied here before?

- Yes
- No

If yes, position and date of application:

Have you ever been convicted of a felony?

(Do not include convictions that have been sealed, expunged or statutorily eradicated.)

- Yes
- No

Qualifications

Certified Position/Licenses/Certifications: _____

State License Number: (include State) _____

Other _____

Qualifications and Special Skills: _____

Education and Training

High School _____

City - State _____

Did you graduate? Yes No Not Yet _____
Date

College _____

City - State _____

Did you graduate? Yes No Not Yet _____
Date

Industry Academy / Beauty School _____

City - State _____

Did you graduate? Yes No Not Yet _____
Date

Other Training, Education and Honors: _____

Employment History

Please list present or most recent employment first.

Employer _____ Date Hired _____ Date Departed _____ Supervisor Name _____ Position _____

Phone: _____ Salary: _____ Duties: _____

Reason for Leaving: _____

May we contact your present employer?

Yes

No

Employer _____ Date Hired _____ Date Departed _____ Supervisor Name _____ Position _____

Phone: _____ Salary: _____ Duties: _____

Reason for Leaving: _____

Employer _____ Date Hired _____ Date Departed _____ Supervisor Name _____ Position _____

Phone: _____ Salary: _____ Duties: _____

Reason for Leaving: _____

References

Please provide contact information for three individuals not related to you.

Name _____ Phone _____ Relationship to you _____ Years Known _____

1. _____

2. _____

3. _____

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release La Mirage Hair & Day Spa from all liability for any damage that may result from utilization of such information. I also understand and agree that no representative of La Mirage Hair & Day Spa has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized La Mirage Hair & Day Spa representative."

Applicant Signature: _____ INTERNET APPLICATION - APPLICANT WILL SIGN AT INTERVIEW _____ Date: _____

La Mirage Hair & Day Spa is an equal opportunity employer.

The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age. This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination.