

## The Studio Glam

## **Employment Application**

(203) 780-8133

		Applicant I	nform	ation				
Full Name:					Date:			
	Last	First			M.I.	·		
Address:	2							
	Street Address					Apartment/Unit	#	
	City				State	ZIP Code		
	•		_					
Phone:			=mail					
Date Available: Cosmetology License #:					Desired	l Salary: <b>\$</b>		
Position App	olied for:							
Are you a ci	tizen of the United States	YES NO	If no, a	are you	authorized to wo	YES ork in the U.S.?	NO	
Have you e	ver been convicted of a fe	YES NO Ony?						
If yes, expla	in:							
		Educ	ation					
High Schoo	l:	Address:						
From:	To:	_ Did you graduate?	YES	NO	Diploma:			
College:		Address:						
From:	To:	_ Did you graduate?	YES	NO	Degree:			
Other:		Address:						
From:	To:	_ Did you graduate?	YES	NO	Degree:			
		Refere	ences					
Please list	three professional refere	nces.						
Full Name:					Relation	ship:		
						one:		
Address:								

Full Name:				Relationship:	
				Phone:	
Address:					
Full Name:				Relationship:	
				Phone:	
۸ ما ما سم م م م .					
	Previous Er	nploym	ent		_
Company:				Phone:	
Address:					
Job Title:	Starting Sa		Ending Salary:\$		
Responsibilitie	es:				
From: _	To:	or Leaving:			
May we conta	ct your previous supervisor for a reference?	YES	NO		
C				Dhana	
				Phone: Supervisor:	
_					
Job Title: _	Starting Salary:			Ending Salary:	
Responsibilitie	es:				
From: _	To:	Reason f	or Leaving:		
May we contain	ct your previous supervisor for a reference?	YES	NO		
Company: _				Phone:	
Address: _				Supervisor:	
Job Title: _	Starting Salary:			Ending Salary:	
Responsibilitie	98:				
From: _	To:	To: Reason for Leaving:			
May we contain	ct your previous supervisor for a reference?	YES	NO		

Disclaimer and Signature					
I certify that my answers are true and complete to the be	est of my knowledge.				
If this application leads to employment, I understand tha interview may result in my release.	t false or misleading information in my application or				
Signature:	Date:				

There are two ways to send your completed application:

By Mail: The Studio Glam 996 Dixwell Avenue, 1<sup>st</sup> Floor Hamden, CT 06514

<u>By E-Mail:</u> thestudioglam.salon@gmail.com

Thank you for submitting your application with us!

The Studio Glam