



Application For Employment

Date: _____

Please print clearly in ink, and provide all requested information.

Personal Data

Full Name _____

Last

First

Middle

Current Address _____

Street & Number

City

State

Zip Code

Preferred Name or Nickname	Cellular Phone Number	E-mail Address	Social Security Number

Have you ever worked for a Barbershop/Salon before? Yes No

Were you referred for employment to Matt's On Mendon? Yes No If yes, by whom? _____

If hired, can you provide proof of identity and authorization to work in the U.S.? Yes No

Are you at least 18 years of age? Yes No

Have you been convicted of a felony? Yes No If yes, please provide details including date, location, nature of offense and disposition: _____

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, veteran status, handicap, marital status, or any other legally protected status.

Employment Desired

Position you are applying for: _____ Date available for work: _____

Hourly/salary/percentage requirement: _____

Shift Preference: Full-time Part-time

Are you related to anyone employed at any Matt's On Mendon? Yes No

If yes, name: _____

Education

CIRCLE HIGHEST GRADE COMPLETED: **HIGH SCHOOL** 9 10 11 12 **COLLEGE**

HIGH SCHOOL:

Name

City

State

DIPLOMA OR GED: Yes No

COLLEGE: (List all whether or not degree or license was obtained)

NAME	LOCATION	MAJOR FIELD OF STUDY	DEGREE, CERTIFICATION, OR LICENSE (Provide License number and expiration Date)

Do you have any objection to our contacting your previous schools? Yes No

Additional job-related seminars, courses, workshops or other education experiences: _____

What do you hope to gain/experience by working at Matt's On Mendon?: _____

Languages you speak, read and write fluently: _____

When did you acquire your first license? _____

When did you begin cutting hair in a barbershop and where? _____

What specific experience do you have regarding shaving? _____

Employment Experience

Please give accurate, complete full-time and part-time employment record. Start with current or most recent employer. **All information must be included, even if you are attaching a resume.** Please attach an additional sheet if necessary.

Employer	Work Performed
Address	
Telephone Number()	
Job Title Supervisor	
Reason for leaving	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed FROM: _____ TO: _____	Hourly Rate/Salary STARTING: _____ FINAL: _____

Explain any time between jobs:

Employer	Work Performed
Address	
Telephone Number()	
Job Title Supervisor	
Reason for leaving	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed FROM: _____ TO: _____	Hourly Rate/Salary STARTING: _____ FINAL: _____

Explain any time between jobs:

Employer	Work Performed
Address	
Telephone Number()	
Job Title Supervisor	
Reason for leaving	May we contact employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed FROM: _____ TO: _____	Hourly Rate/Salary STARTING: _____ FINAL: _____

Explain any time between jobs:

Personal References

Please Provide complete names and phone numbers (including area code) that can be contacted Monday-Friday 8:00am–5:00pm. Professional references are preferred **(including teachers, supervisors, co-workers, and classmates.)**
(Persons listed cannot be relatives, this includes in-laws.)

<u>Name</u>	<u>Job Title</u>	<u>Relationship</u>	<u>Phone</u>

Agreement and Signature

Read Carefully Before Signing: I certify that the statements and information furnished by me in this application are true and correct. I understand that omitted, false or misstated statements on this application are grounds for refusal to hire, or dismissal, at any time the Company becomes aware of the omitted, falsified, or misstated information. In consideration of my employment, I agree to conform to the rules and regulations of your company. And acknowledge that my employment and compensation can be terminated, with or without cause, and with or without notice at any time, at the option of either the Company or myself. I further understand that no policy, benefit, or procedure contained in any employee handbook creates an employment contract for any period of time. In addition, no term or conditions of employment contrary to the foregoing should be relied upon, except for those made in writing by the CEO of the Company. I further acknowledge that the employer reserves the right to charge the terms and conditions of employment, including the employee job duties, working hours, and employment policies at any time.

I agree and hereby authorize Matt's On Mendon to conduct an investigation of all statements contained in this application, and any company form completed by me for employment as may be necessary in arriving at an employment decision. I authorize all previous employers or other persons who have knowledge of my records, to release such information to Matt's On Mendon, their agents, or me.

I understand that I will be required to complete the Immigration/Naturalization Service Form I-9 and will show supporting documentation.

My signature certifies that I have read and agree with the above statements.

Date of Application: _____ Signature of Applicant: _____

Thank you for completing this application form and for your interest in

Matt's On Mendon!

E-mail application to: MBLussier@gmail.com