Mobile Salon and Spa Services CONTRACTORS APPLICATION

Last name.	riist name.
(please print)	
Phone:	Birthdate://
	$(m) \qquad \qquad (d) \qquad \qquad (y)$
E-mail:	Fax:
Address:	
	(Street)
(City)	(State/Province) (Zip code/Postal code)
Are you currently employed? [] Yes [] No
What is your present occupation?	
When are you available to start work?	
What is your past experience?	What is your past education?
1	
2	
3	
Please list any volunteer work you do:	What do you like to do in your spare time?
1	
2	
3	
Please list two previous places of employment:	
(Business name)	(Business name)
(Employer 's/Manager 's name)	(Employer 's/Manager 's name)
(Phone number)	(Phone number)
Why did you leave?	Why did you leave?
Can we call for a reference?	Can we call for a reference?
[] Yes [] No	[] Yes [] No

References

on/Occupation)
number)
e call for a reference?
] Yes [] No
are three characteristics you believe are found reat staff member?
ou confident that you either possess these eteristics or have the ability to learn them?
] Yes [] No
d know?
, declare that the statements made in this are to the best of my knowledge true and correct.
ure)
$\frac{1}{n} \frac{1}{(d)} \frac{1}{(y)}$
a

Thank you for taking the time to complete this application. We look forward to having you work with us some day!