

RENARDÉ SALON

Renardé Salon • 1930 Hwy 35 Suite 7 Wall NJ 07719 • 732-449-4300

Application For Employment

Date: _____

Full Name: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____

Email: _____

What position are you applying for? _____

When can you begin? _____

Are you applying for: Full Time _____ Part Time _____ Are you available: Day _____ Night _____ Saturday _____

Why have you chosen to apply at Renardé Salon? _____

Are you currently employed? _____

If yes, why are you considering leaving your current position? _____

Have you held any leadership positions? yes _____ no _____ Where? _____

Have you attended any leadership training? _____

Education

High School: _____ Year Graduated: _____

Subjects studied: _____

Cosmetology/Barber School: _____ Graduate? _____

If not, hours to date: _____

Are you a licensed cosmetologist/barber? _____

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Do you have your permit? _____

Do you have any advanced training? _____

College/Trade/Other: _____

Year Graduated: _____ Major: _____

Employment History (starting with most recent):

Company: _____

Address: _____

Phone: _____ Job Title: _____

Job Responsibilities: _____

Supervisor: _____ May we contact them? _____

Date Started: _____ Date Ended: _____

Start Salary: _____ End Salary: _____

Reason for Leaving: _____

Company: _____

Address: _____

Phone: _____ Job Title: _____

Job Responsibilities: _____

Supervisor: _____ May we contact them? _____

Date Started: _____ Date Ended: _____

Start Salary: _____ End Salary: _____

Reason for Leaving: _____

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Supervisor: _____ May we contact them? _____

Date Started: _____ Date Ended: _____

Start Salary: _____ End Salary: _____

Reason for Leaving: _____

References: Please list 3 people of which you are not related and have known for more than 1 year.

1. Name: _____ **Phone:** _____

How do you know each other? _____ **Number of years?** _____

2. Name: _____ **Phone:** _____

How do you know each other? _____ **Number of years?** _____

3. Name: _____ **Phone:** _____

How do you know each other? _____ **Number of years?** _____