

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

If applying for nail tech, will you be doing nail enhancement? Yes ☐ No ☐

Employment Desired: Full Time ☐ Part Time ☐ All Available Shifts ☐ Temporary ☐

Do you hold a current Wisconsin cosmetology or manicurist license? Yes ☐ No ☐

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? _____

Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Beauty School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

References

Please list two professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that by filling out this application does not constitute a promise or guarantee of employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

If employed by Attitude Nail, I agree to abide by its rules and regulations.

I hereby authorize all persons, companies and corporations to release and provide any and all information regarding my employment to Attitude Nail and release Attitude Nail from all liabilities for issuing this information.

Signature: _____ Date: _____

Attitude Nail Studio, LLC is an Equal Opportunity Employer and complies fully with Federal and Wisconsin laws prohibiting discrimination in employment because of sex, age, race, color, creed, national origin, religion, marital status, availability for military services, disability, sexual orientation or arrest/conviction record.

Attitude Nail Studio, LLC will make reasonable accommodations to known physical or mental limitations of a qualified applicant or employee with a disability unless the accommodations would impose an undue hardship or a significant risk of substantial harm.