

Form R1-01A Application for Employment

**Employment Application
Fuzion Salon & Spa is an Equal Opportunity Employer**

Fuzion Salon & Spa does not discriminate on the basis of age (as defined by applicable law), religion, sex, race, color, sexual orientation, national origin, disability, veteran status or other legal protected group. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based upon job-related qualifications.

Date of application: _____

Position(s) applied for: _____ Full-time ___ Part-time/On-call ___

Name: _____							
Last		First		Middle			
Address: _____							
Number		Street		City	State		Zip Code
Telephone: _____			Social Security No.: _____				

Have you ever worked in salon or spa industry? ___ Yes ___ No

Can you, after employment, submit verification of your legal right to work in the United States? ___ Yes ___ No

Are you at least 18 years old? ___ Yes ___ No If not, state your age (for child labor law purposes only) _____

Do you have any relatives or friends currently employed at Fuzion Salon & Spa ___ Yes ___ No

If yes, please provide name(s) and relationship(s), _____

Are you available to be on-call 24 hours/seven days a week if required by the position? ___ Yes ___ No

Have you ever been convicted of a violation of the law (except minor traffic violation or sealed record)?
___ Yes ___ No (A yes does not automatically disqualify you from employment since the nature of the offense, date and the job for which you are applying will also be considered.)

If Yes, please give details: _____

SPECIAL SKILLS, TRAINING OR CERTIFICATIONS

Typing Speed _____ WPM Speedwriting _____ WPM Computer Skills _____

Current Certifications and Licenses: _____

List additional skills that are related to the position for which you are applying:

Referred by: ___ Newspaper/advertisement ___ Agency ___ Employee (Write name below) ___ School

Please specify other referral source: _____

EDUCATIONAL BACKGROUND

Type of School	Name, City, State	Graduated (Yes/No)	Course or Major

EMPLOYMENT EXPERIENCE

Please list employment experience beginning with your most recent job. Account for all periods of time, including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

(1) Name and Address of Company:	Date Employed	Describe the work you did
	From (Mo/Yr) to (Mo/Yr)	
Phone Number(s):	Hourly Rate/Salary Starting Rate/Ending Rate	Reason for Leaving
Job Title:	Supervisor:	Contact information for Supervisor:
(2) Name and Address of Company:	Date Employed	Describe the work you did
	From (Mo/Yr) to (Mo/Yr)	
Phone Number(s):	Hourly Rate/Salary Starting Rate/Ending Rate	Reason for Leaving
Job Title:	Supervisor:	Contact information for Supervisor:
(3) Name and Address of Company:	Date Employed	Describe the work you did
	From (Mo/Yr) to (Mo/Yr)	
Phone Number(s):	Hourly Rate/Salary Starting Rate/Ending Rate	Reason for Leaving
Job Title:	Supervisor:	Contact information for Supervisor:

(Please add additional sheets if needed)

May we contact the employers you have listed? ___ Yes ___ No

REFERENCES

List name and telephone number of two business/work references that are not related to you.

Name _____ Company _____

Relationship _____ Years Known _____ Phone number _____

Name _____ Company _____

Relationship _____ Years Known _____ Phone number _____

PLEASE READ CAREFULLY Before signing this application:

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the information contained in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize Fuzion Salon & Spa to make such investigation and inquiries of the information provided and other related matters as may be necessary. I hereby release employers, schools, and other persons, institutions, or businesses from all liability in responding to inquiries in connection with my application.

I understand I will be required to successfully pass a criminal background check. I hereby consent to criminal background check as a condition of employment, if required.

I further understand and agree that nothing in this application form shall constitute a contract of employment nor shall constitute a guarantee of employment.

Date: _____

Signature of applicant: _____