



FAX COMPLETED APPLICATION TO 952-936-9103
 OR EMAIL COMPLETED APPLICATION TO: NICHOLEN@BEAUTYCRAFT.COM

WWW.BEAUTY CRAFT.COM
APPLICATION FOR EMPLOYMENT

To the applicant: Thank you for your interest in our organization. Your application will receive consideration without regard to race, creed, color, sex, age, national origin or handicap. To enable us to properly and fairly evaluate your application, please answer all of the questions as carefully and completely as possible.

PERSONAL DATA:

Name _____
 Address: _____
 Telephone No _____ Soc. Sec. No.: _____
 Position applied for _____ When can you start _____

GENERAL INFORMATION

Previously employed here? _____ Yes _____ No If so, what were the dates of your employment? From _____ To _____
 Your Position _____

EMPLOYMENT RECORD

Please provide information covering your employment history. Cover at least the last 5 years. Include periods of military service, if any. Note any gaps in your employment. Begin with your most recent job and work background.

Current or most recent employer _____

Name and address of Company	From Date Mo./Yr.	To Date Mo./Yr.	Starting Salary	Last Salary	Reason for leaving
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Name of Supervisor _____ In detail describe your duties: _____

Type of business: _____ Telephone No. _____

Name and address of Company	From Date Mo./Yr.	To Date Mo./Yr.	Starting Salary	Last Salary	Reason for leaving
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Name of Supervisor _____ In detail describe your duties: _____

Type of business: _____ Telephone No. _____

Name and address of Company	From Date Mo./Yr.	To Date Mo./Yr.	Starting Salary	Last Salary	Reason for leaving
Name of Supervisor _____ In detail describe your duties: _____					
Type of business: _____ Telephone No. _____					

Name and address of Company	From Date Mo./Yr.	To Date Mo./Yr.	Starting Salary	Last Salary	Reason for leaving
Name of Supervisor _____ In detail describe your duties: _____					
Type of business: _____ Telephone No. _____					

May we contact these employer _____ Yes _____ No

EDUCATION	Name of School	Location of School	Circle last Year Completed	Did You Graduate?	Subjects Studied & Degree(s) Received
High School:			1 2 3 4 5	Yes or No	
College:			1 2 3 4 5	Yes or No	
Trade, Business or Correspondence School:			1 2 3 4 5	Yes or No	

Subjects of Special Study or Research Work:

List Activities Other Than Religious: (Civic, Athletic, Etc.)

EXCLUDE ORGANIZATION - The name or character of which indicates the race, creed, or national origin of its members

Personal References - do not list relatives or former employers		
NAME	ADDRESS	PHONE
1		
2		
3		

I authorize investigation of all statements contained in this application. I understand misrepresentation or omission of fact called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Date: _____ Signature: _____