



THE
VILLAGE
SALON

ADVANCED HAIR & SKIN CARE

The Village Salon Employment Application

Please fill out the application in its entirety, even if you have a resume. Incomplete applications will not be considered.

Personal Information

Date: _____ E-mail Address: _____

May we contact you at this e-mail address for further correspondence?

Yes No

First Name: _____ Last Name: _____

Address: _____

City/State/Zip: _____

How long have you been at the above address? _____

Home Phone: _____ Cell Phone: _____

Date of Birth: _____ Social Security #: _____

Have you ever been employed by VS? Yes No

List relatives in our employ (past or present):

Are you a US citizen? Yes No

Do you have a drivers license? Yes No

What is your means of transportation to work? _____

Do you have any physical conditions which may prevent you from performing salon related work? Yes No

If yes, please describe:

Have you had a major illness in the past 3 years? Yes No

If yes, please describe:

Have you ever been charged with or convicted of a crime, including a major motor vehicle violation? Yes No

If yes, explain number of charges/conviction(s), nature of offense(s) leading to charges/conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and/or types(s) of rehabilitation:

THE VILLAGE SALON
2 S. Main Street
Pennington, New Jersey 08534

Phone: 609-737-0703
Fax: 609-730-9164
Email: info@thevillagesalon.com



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Desired Employment

- Stylist Administrative Front Desk
- Nail Tech Esthetician

Date you can start: _____ Salary/Hours desired: _____

Are you interested in year-round or seasonal employment?

- Year-Round Seasonal

Are you interested in full-time or part-time? Full-Time Part-Time

Days available to work:

- No Preference Tues Wed Thurs Fri Sat

Nights available to work:

- No Preference Tues Wed Thurs Fri

Are you employed now? Yes No

If yes, may we contact your current employer? Yes No

Who referred you to the Village Salon for possible employment?

Education Information

Cosmetology School: _____

Location: _____

Years Attended: _____ Did you graduate? Yes No

License Date: _____ State First Licensed In: _____

Can you product a valid NJ cosmetology license? Yes No

Describe other cosmetology training:

Advanced Salon Oriented Courses:

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Skills

	<i>Skilled In</i>	<i>Advanced Training</i>		<i>Skilled In</i>	<i>Advanced Training</i>
<u>Haircutting</u>			<u>Styling Techniques</u>		
Razor cutting	<input type="checkbox"/>	<input type="checkbox"/>	Wet Setting	<input type="checkbox"/>	<input type="checkbox"/>
Scissor cutting	<input type="checkbox"/>	<input type="checkbox"/>	Formal Style	<input type="checkbox"/>	<input type="checkbox"/>
Deva cutting	<input type="checkbox"/>	<input type="checkbox"/>	Blow Drying	<input type="checkbox"/>	<input type="checkbox"/>
Childrens cuts	<input type="checkbox"/>	<input type="checkbox"/>	Electric Rollers	<input type="checkbox"/>	<input type="checkbox"/>
<u>Coloring</u>			Heating Iron	<input type="checkbox"/>	<input type="checkbox"/>
Single Process	<input type="checkbox"/>	<input type="checkbox"/>	Hair Piece Styling	<input type="checkbox"/>	<input type="checkbox"/>
Double Process	<input type="checkbox"/>	<input type="checkbox"/>	Extensions	<input type="checkbox"/>	<input type="checkbox"/>
Correction Coloring	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____		
Frosting	<input type="checkbox"/>	<input type="checkbox"/>			

Other: _____

Permanent Waving

Conventional	<input type="checkbox"/>	<input type="checkbox"/>
Straightening	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____		

Special Skills

Facials	<input type="checkbox"/>	<input type="checkbox"/>
Make-up	<input type="checkbox"/>	<input type="checkbox"/>
Manicures	<input type="checkbox"/>	<input type="checkbox"/>
Pedicures	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____		

Management Skills

Cash register	<input type="checkbox"/>	<input type="checkbox"/>
Bookkeeping	<input type="checkbox"/>	<input type="checkbox"/>
Merchandising	<input type="checkbox"/>	<input type="checkbox"/>
Ordering Supplies	<input type="checkbox"/>	<input type="checkbox"/>
Recruiting	<input type="checkbox"/>	<input type="checkbox"/>

Administrative Skills

Preparing Payroll	<input type="checkbox"/>	<input type="checkbox"/>
Booking Appts	<input type="checkbox"/>	<input type="checkbox"/>
Training	<input type="checkbox"/>	<input type="checkbox"/>
Promotions	<input type="checkbox"/>	<input type="checkbox"/>
Advertising	<input type="checkbox"/>	<input type="checkbox"/>

Skills not mentioned:

Can you operate the following business equipment devices?

- Computer/PC
- Credit Card Terminal
- Telephone/Voice Mail

Do you have money handling/cashiering experience? Yes No

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Employment History

Company: _____ Dates of Employment _____

Address _____

Job Title: _____ Salary: _____

Job Description: _____

Supervisor Name/Phone Number: _____

Reason for leaving: _____

Company: _____ Dates of Employment _____

Address _____

Job Title: _____ Salary: _____

Job Description: _____

Supervisor Name/Phone Number: _____

Reason for leaving: _____

Company: _____ Dates of Employment _____

Address _____

Job Title: _____ Salary: _____

Job Description: _____

Supervisor Name/Phone Number: _____

Reason for leaving: _____

An application form sometime makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying:



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Please read and check below:

In exchange for the consideration of my job application by The Village Salon (hereinafter called the Company), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and in the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of The Village Salon, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President of the Company. Both the undersigned and The Village Salon may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally changed and revise their benefit, policies and procedures and such changes may include reduction in benefits.

I authorize the facts set forth in my application for employment at The Village Salon are true and complete. I understand if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any inquiries of my personal history in establishing my credibility for employment at The Village Salon. This includes personal interviews with past employers as to my personal character, general reputation and personal characteristics.

Name: _____

I agree: Yes No

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