



### EMPLOYMENT APPLICATION

Charm & Company Salons (the "Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

PERSONAL				
Last Name		First		M.I.
Street Address			Phone Number(s)	
City		State		ZIP
Date Available		Referred By		Desired Salary
Position Applied for				
Have you ever interviewed with the Company or its affiliates before?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list date(s), job title(s), & location(s)
Have you ever been employed by the Company or its affiliates before?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list date(s), job title(s), & location(s)
Do you have any relatives employed by the Company or its affiliates?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list date(s), job title(s), & location(s)
Are you at least 18 years old?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	
EDUCATION				
Circle highest grade completed:				
High School		9	10	11 12
College, Trade or Business		1	2	3 4
Graduate Studies		_____		
School	Address	Major Studies	Degree, Diploma, License or Certificate	
High School				
College/University				
Vocational, Business, Other				
List any Professional Designations				

Other Special Knowledge, Skills or Qualifications	
For Clerical positions only: Do you type? Please List computer skills.	

**EMPLOYMENT HISTORY**

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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			

**GENERAL**

YES      NO

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Do you have your Cosmetology/Manicurist License? Date of Expiration_____   |
| <input type="checkbox"/> | <input type="checkbox"/> | May we contact your current employer for references?   |
| <input type="checkbox"/> | <input type="checkbox"/> | If hired, will you be able to work full time?  |
| <input type="checkbox"/> | <input type="checkbox"/> | Will you be able to perform the essential job functions for the position you are applying with or without reasonable accommodations?   |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by the court? (A "yes" response does not necessarily disqualify your application.) |

#### CERTIFICATION AND AUTHORIZATION

The above information is true and correct. I understand that in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize the Company to inquire into my educational, professional, and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I understand that nothing on this application, the granting of an interview, or my subsequent employment with the Company is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary, I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for the completion of the I-9. I will also be required to provide original documents which verify my cosmetology/manicurist license as provided under the terms of the State Board of Cosmetology.

I hereby acknowledge that I have read and agree to the above statements.

Signature

Date