

N.W. BEAUTY

Supply & Salon

Post Office Box 9459, Spokane WA, 99209
Fax 509-483-9530

Employment Application

Name _____
Last First MI

Address _____
Street City State Zip

Home phone _____ Work phone _____ Alternate phone _____

Position applied for _____ Salary required _____

Location preference/limitations _____ Date available _____

Are you a current or former N.W. Beauty, Inc. employee? Yes No

If yes: Start date _____ End date _____

Location _____ Position _____

Are you 18 years of age or more? Yes No If under 18, please provide your Birth Date ____/____/____ and Current Age _____

Are you a lawful permanent resident or alien authorized for employment in the U.S.? Yes No
If no, please provide immigration status and assistance needed _____

Have you ever pled guilty to or been convicted of any crime other than a misdemeanor or routine traffic offense within the last 10 years? Yes No
(An affirmative answer will not automatically disqualify you from employment.) If yes, please give details of the offense. _____

Education/Training

School Name, City and State	Course of Study	Graduated? Yes/No	Degree Obtained
High School			
College			
Graduate School			
Technical/Other			

Additional Job-Related Competencies/Skills

Employment History

Begin with most recent employer (including military service). If you have had more than three employers, provide additional information on an attachment to this application

Company name _____

Address _____

Type of business _____ Start date _____ End date _____

Supervisor's name and title _____ Phone () _____ Final salary _____

Your title _____ Reason for leaving/discharge _____

Work responsibilities _____

Employment History (continued)

Company name _____

Address _____

Type of business _____ Start date _____ End date _____

Supervisor's name and title _____ Phone () _____ Final salary _____

Your title _____ Reason for leaving/discharge _____

Work responsibilities _____

Company name _____

Address _____

Type of business _____ Start date _____ End date _____

Supervisor's name and title _____ Phone () _____ Final salary _____

Your title _____ Reason for leaving/discharge _____

Work responsibilities _____

Have you ever been discharged from any employment, asked to resign or advised that, if you did not resign, your employment would be terminated? If so, please describe in detail: _____

Employment Availability Section

Please indicate time/hours you are available to work.

	8:00 a.m.	9:00 a.m.	10:00 a.m.	11:00 a.m.	12:00 p.m.	1:00 p.m.	2:00 p.m.	3:00 p.m.	4:00 p.m.	5:00 p.m.	6:00 p.m.	7:00 p.m.	8:00 p.m.	9:00 p.m.	10:00 p.m.
Monday															
Tuesday															
Wednesday															
Thursday															
Friday															
Saturday															
Sunday															

Any/All Hours and Days Available

Applicant Statement

I authorize inquiries of any person or organization to give or verify information pertinent to my application for employment at N.W. Beauty, Inc. I understand and agree that this application and other submissions become the property of N.W. Beauty, Inc. and that any false statements or any false answers or material omissions on this application form or any supplements thereto or in any interviews may result in cancellation of my application or in immediate dismissal if subsequently employed. I agree to return any property upon termination of my employment; and to comply with all rules regulations, policies and procedures of N.W. Beauty, Inc. In consideration for employment by N.W. Beauty, Inc., I hereby agree to be bound by N.W. Beauty, Inc. Policies and Procedures. I understand that this policy applies to intellectual property that is developed after the date of my employment. I hereby acknowledge that a copy of that policy is available for my review. This form is executed with the intention to be legally bound, but should not be considered an employment contract.

I further acknowledge that if hired my employment with N.W. Beauty, Inc. is at-will, meaning that N.W. Beauty, Inc. may terminate the employment relationship either with or without cause, without notice, at the sole discretion of N.W. Beauty, Inc. regardless of the method or manner of payment of salary or wages.

Signature _____ Date _____

Print Name _____

N.W. Beauty, Inc. does not discriminate and N.W. Beauty, Inc. is required not to discriminate in employment, or administration of its programs or activities on the basis of race, color, national origin, sex or disability in violation of Title VII of the Civil Rights Act of 1964 or other federal, state or local laws or executive orders. In addition, N.W. Beauty, Inc. does not discriminate in employment or administration of its policies on the basis of religion, creed, ancestry, belief, age, veteran status, sexual orientation, family or caregiver responsibilities or in violation of federal, state or local laws or executive orders.

Referred by: _____