Serenity Salon & Spa

Employee Application Form

This Information is Private & Confidential!

Please answer ***each question*** *completely - and as honestly as possible - so we may support you fully in achieving* ***personal fulfillment,*** *as well as* ***professional*** *and* ***financial success.***

Today's Date: _____

Applicant's Name: _____

Home Address: _____

City: _____

State: _____ Zip Code: _____

Current Name of Salon or Spa where you work: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Position or Title: _____

Work Number: _____

Home Number: _____

Cell Number: _____

Fax Number: _____

E-mail Address: _____

Number of Years in the Industry: _____ Number of Years at current Salon / Spa: _____