

Sky Lounge Skin Care



Employment Application

519 N. Charles Street
1st Floor Suite
Baltimore, MD 21201
(443)839-4901

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____

Position Applying for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Are you licensed or certified in/for the position in which you are applying for? YES NO If yes, since when? _____

Are you available evenings? YES NO

Are you available weekends? YES NO

Industry Education

Beauty School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO License #: _____

Advanced Education: _____ For: _____

From: _____ To: _____ Certificate? YES NO Degree/s: _____

Special Skill : _____

Special Achievements: _____

References

Please list three **professional** references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____