



**Employment History** (Please begin with your most recent employer. Do not exclude any employment. Attach an additional sheet, if necessary):

**Most Recent Employer:**

Company Name: \_\_\_\_\_

Employment from: \_\_\_\_\_ to \_\_\_\_\_ Phone: \_\_\_\_\_

Rate of Pay: Start \_\_\_\_\_ End: \_\_\_\_\_ Email: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

May we contact this employer?  Yes  No

Reason for leaving (or wanting to leave): \_\_\_\_\_

**Next Employer:**

Company Name: \_\_\_\_\_

Employment from: \_\_\_\_\_ to \_\_\_\_\_ Phone: \_\_\_\_\_

Rate of Pay: Start \_\_\_\_\_ End: \_\_\_\_\_ Email: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

May we contact this employer?  Yes  No

Reason for leaving (or wanting to leave): \_\_\_\_\_

**Next Employer:**

Company Name: \_\_\_\_\_

Employment from: \_\_\_\_\_ to \_\_\_\_\_ Phone: \_\_\_\_\_

Rate of Pay: Start \_\_\_\_\_ End: \_\_\_\_\_ Email: \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_

May we contact this employer?  Yes  No

Reason for leaving (or wanting to leave): \_\_\_\_\_

**Please list name, phone number of three references that are not related to you and how you know them:**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

I attest that all information I have provided in this employment application is true and correct. I understand that the falsification of any information on this application will remove me from consideration for employment and, if employed, may result in my termination. I understand that any offer of employment or continued employment is contingent upon the receipt of satisfactory results of a drug screen and background check by Avalon Salon and Day Spa, Inc.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date