

Employment History (Beginning with the most recent)

1	Employer Name	Address	Phone #
	Last Position Title (From-To)	Name and Title of Supervisor	Dates Employed
	Salary (Starting/Finish)	Reason for Leaving	
2	Employer Name	Address	Phone #
	Last Position Title (From-To)	Name and Title of Supervisor	Dates Employed
	Salary (Starting/Finish)	Reason for Leaving	
3	Employer Name	Address	Phone #
	Last Position Title (From-To)	Name and Title of Supervisor	Dates Employed
	Salary (Starting/Finish)	Reason for Leaving	

Education

School	School Name & Address	Years Attended (From- To)	Date Degree Earned or Expected	Course of Study	GPA	Degree
High School						
College						
Specialized Training						

Please Read and Sign Below

Synergy Salon is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, disability, or any other reason prohibited by federal or local law. We assure you that your opportunity for employment with us depends solely on your qualifications.

I understand that this application is not a contract, offer, or promise of employment and that if hired, I will be able to resign at any time for any reason. Likewise, Synergy Salon can terminate my employment at any time with or without cause. Furthermore, I understand that no person other than the President of Synergy Salon has the authority to enter into an employment contract with me and that any exception to all at-will relationship must be evidenced by a written agreement signed by me and the President of Synergy Salon.

I acknowledge my responsibility to fully complete this application form. I authorize investment of statements made herein, including the use of background checks. I understand that misrepresentation or omission of facts called for my result in my termination, if employed.

Signature

Date

Thank you for completing this form and for your interest in our business.