



APPLICATION FOR SALON CHAIR RENTAL

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ DOB \_\_\_\_\_

Cosmetology License # \_\_\_\_\_ Issue date: \_\_\_\_\_

Phone# \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Have you ever been convicted of a crime? (If so, please explain)

\_\_\_\_\_

Social media page: \_\_\_\_\_

Days per week desired: \_\_\_\_\_ Desired start date: \_\_\_\_\_

EMPLOYMENT HISTORY: Please begin with your most recent employer. If currently employed may we contact your present employer? [ ]Yes [ ]No

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

Address: \_\_\_\_\_

\_\_\_\_\_ Phone# \_\_\_\_\_

Employed from/to \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_ Phone# \_\_\_\_\_

Employed from/to \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

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

Address: \_\_\_\_\_

\_\_\_\_\_ Phone# \_\_\_\_\_

Employed from/to \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

ADDITIONAL REFERENCES: Please list any references that can recommend you. You may also list any websites or social media that contain reviews or pictures of your work.

---

---

---

I certify that the answers given are true to the best of my knowledge. I hereby authorize April Ray Salon to contact any and all former employers, personal references and private or public agencies to obtain any information relevant to my professionalism and character in the workplace.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date