



# L.L. McKee Salon Employment Application

**Address:** 3119 Valley Ave. Winchester, VA 22602

**Phone:** (540) 678-3533

**Today's Date:** \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

**DESIRED SALARY:** \_\_\_\_\_

**PER HOUR:** \_\_\_\_\_

## **GENERAL INFORMATION:**

NAME (last, first, middle initial) \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

HOME PHONE NO. \_\_\_\_\_ CELL PHONE NO. \_\_\_\_\_

ARE YOU AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

PROOF OF AUTHORIZATION? YES NO

I AGREE TO RANDOM DRUG TESTING? YES NO

## **TRAINING AND EDUCATION:**

CIRCLE HIGHEST GRADE COMPLETED:      8              9              10              11              12              GED

COLLEGES/other training: \_\_\_\_\_

MAJOR/subject: \_\_\_\_\_ DEGREE/certificates: \_\_\_\_\_

## **ADDITIONAL SKILLS** (describe skills relevant to the job for which you are applying)

- **SKILL**

**OFFICE EQUIPMENT, COMPUTERS, SOFTWARE** (typing speed, programs, etc.)

**TYPE OF EXPERIENCE:** \_\_\_\_\_

**LEVEL OF EXPERTISE:** \_\_\_\_\_

- 
- SKILL

TECHNICAL SKILLS, PROFESSIONAL LICENSES: \_\_\_\_\_

---

TYPE OF EXPERIENCE: \_\_\_\_\_

---

LEVEL OF EXPERTISE: \_\_\_\_\_

- 
- SKILL

ADVANCED TRAINING: \_\_\_\_\_

---

TYPE OF EXPERIENCE: \_\_\_\_\_

---

LEVEL OF EXPERIENCE: \_\_\_\_\_

- 
- SKILL

OTHER: \_\_\_\_\_

---

CAN YOU PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB WITH OR WITHOUT REASONABLE ACCOMMODATION?    YES    NO

**BACKGROUND INFORMATION:**

EACH CASE IS CONSIDERED SEPARATELY BASED ON JOB DUTIES AND PERFORMANCE AREAS

Do you have a valid Virginia State Driver's License?    YES    NO                      Other State: \_\_\_\_\_

(If position applied for involves driving), have you been convicted, pleaded to no contention or paid a fine for any traffic violations in the past three years?    YES    NO                      If yes, please explain: \_\_\_\_\_

Have you been convicted of a felony or served time in prison within the last 10 years?                      YES    NO

Conviction will not necessarily bar you from employment. If yes, please explain: \_\_\_\_\_

---

**How/where did you hear about the position for which you are applying?** \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Beginning with your present or most recent employment, list your employment history. Include self-employment, military service, volunteer experience and periods of unemployment. The following sections MUST be completed even if a resume is submitted.

1. Employer: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Employed from: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Hours worked/week: \_\_\_\_\_

Starting Hourly Rate: \_\_\_\_\_

Last Hourly Rate: \_\_\_\_\_

Position: \_\_\_\_\_

Primary Duties: \_\_\_\_\_

May we contact this employer:    YES            NO            Supervisor's Phone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\_\_\_\_\_

2. Employer: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Employed from: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Hours worked/week: \_\_\_\_\_

Starting Hourly Rate: \_\_\_\_\_

Last Hourly Rate: \_\_\_\_\_

Position: \_\_\_\_\_

Primary Duties: \_\_\_\_\_

May we contact this employer:    YES            NO            Supervisor's Phone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL REFERENCES: Please list below any people in addition to supervisors listed above who can responsibly evaluate your work performance.**

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

Place of employment and title: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Place of employment and title: \_\_\_\_\_

Phone: \_\_\_\_\_

It is understood and agreed that the foregoing is true to the best of my knowledge and that my falsification of this application will be grounds for elimination from further consideration or, if employed L.L. McKee Salon, for dismissal. I authorize L.L. McKee Salon to solicit information regarding my character, general reputation, credit, previous employment, similar background information and to contact all references I have given on my application. I release all parties and persons connected with any such request for information from all claims, liabilities and damages that may arise out of the furnishing of such information. If employed, I release L.L. McKee Salon from any liability for future references it may provide regarding my work history at the firm.

I understand that employment with the employer is "at will", which means that either Lisa McKee or I can terminate the employment relationship at any time, with or without prior notice and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager or executive of the Employer, other than the General Manager has any authority to alter the foregoing.

*Applicant's Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

**Thank You for your Interest in L.L. McKee Salon as an Employer**