



Treccia Salon Employment Application

*please provide as much information as possible.

Email your application to: trecciasalon@comcast.net

1420 N Black Horse Pike, Blackwood NJ 08012

Contact Information	
First Name:	
Last Name:	
Middle Initial:	
Maiden Name (if applicable):	
Street Address:	
Address (cont.):	
City:	
State/Province:	
Zip/Postal Code:	
How long at current address:	year(s)
Country:	
Work Phone:	
Home Phone:	
FAX:	
Email:	
Date of Birth:	
Do you have a drivers license?	
What will be your transportation to work?	

Employment	
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Position Applying For:	

Hours Available:	(Check box below)					
Sun.	Mon.	Tues. (closed)	Wed.	Thurs.	Fri.	Sat.

Hours Available:		(Check box below)	(Check box below)
How many hours can you work weekly?		Nights	Weekends

Employment Desired:	(Please choose one)	(Check box below)
Full	Part	Either

Education	Name of School	Address	No. Of Years	Major/ Degree
Highschool:				
College:				
Tech:				

Please list cosmetology related training classes attended in the last three years. State the subject of the class.

Please list two references other than relatives or previous employers	
Last Name:	
First Name:	
Middle Initial:	
Address:	
City:	
State:	
Zip:	
Last Name:	
First Name:	
Middle Initial:	
Address:	
City:	
State:	
Zip:	

Work Experience	(Fill box below)			
Name of Employer:	Address:	City:	State:	Zip:
Date of Employment:	Job:	Salary:		
From:				
To:				

Work Experience	(Fill box below)			
Why did you leave?:				

Work Experience	(Fill box below)			
Name of Employer:	Address:	City:	State:	Zip:
Date of Employment:	Job:	Salary:		
From:				
To:				
Why did you leave?:				