



AISHA'S SALON & SPA

DATE: _____

APPLICANT INFORMATION

Name: _____
Last Name First Name Middle Initial DOB (MM/DD/YYYY)

Address: _____
House Number Street Name Apartment Number

City State Zip Code

Contact Information: _____
Cell Phone Secondary Number Email Address

Date Available: _____ Social Security No. _____ Desired Salary: \$ _____ Per Hour

DESIRED EMPLOYMENT

Please Mark With X

Positions: Cosmetologist
 Receptionist

Licensed? Yes If Yes, Date of Completion _____
 In School Currently If Yes, # of Hours Completed _____

Locations: Wilcrest
11246 S. Wilcrest Dr. Suite 100 Houston, TX 77099
 Hillcroft
5704 Hillcroft St. Houston, TX 77036
 Williams Trace
3307 Highway 6 Sugar Land, TX 77479
 FM 1960
10714 FM 1960 Houston, TX 77070
 Katy - Fry Rd.
2002 Fry Rd. Suite 101 Katy, TX 77084
 Highway 6
8751 Highway 6 S. Suite V Houston, TX 77083
 Hillcroft 2
5669 Hillcroft St. Houston, TX 77036
 Copperfield
6860 Highway 6 N Suite G Houston, TX 77084
 Sienna Plantation
8720 Highway 6 Suite 200 Missouri City, TX 77459
 Telfair
1227 Museum Square Dr. Suite C Sugar Land, TX 77479
 Eyebrow Express Fiesta
12355 S. Main Street Houston, TX 77035

Type of Employment Requested:
 Full Time
 Part Time If yes, please specify when: _____
 Weekends (Saturday/Sunday)

EDUCATION

Your Education in Brief:

High School: _____

College: _____

Cosmetology School: _____

Special Skills/Training (if Any) _____

EMPLOYMENT HISTORY

Start With Most Recent

1) Company Name _____ Phone No. _____ Position _____

Address _____

Employed From _____ TO _____ Starting Salary \$ _____ Final Salary \$ _____

Supervisor _____ Reason for Leaving _____

Job Description _____

2) Company Name _____ Phone No. _____ Position _____

Address _____

Employed From _____ TO _____ Starting Salary \$ _____ Final Salary \$ _____

Supervisor _____ Reason for Leaving _____

Job Description _____

3) Company Name _____ Phone No. _____ Position _____

Address _____

Employed From _____ TO _____ Starting Salary \$ _____ Final Salary \$ _____

Supervisor _____ Reason for Leaving _____

Job Description _____

REFERENCES

Name: _____ Phone _____ Years Acquainted: _____

Name: _____ Phone _____ Years Acquainted: _____

Name: _____ Phone _____ Years Acquainted: _____

ADDITIONAL NOTES

AISHA'S SALON & SPA
SELF-EVALUATION SURVEY

PLEASE MARK THE BOX THAT BEST DESCRIBES YOUR SKILL LEVEL

NAME:	LOCATION:		DATE:	
	NEED TRAINING	FAIR	GOOD	EXCELLENT
THREADING				
WAXING (Including Brazilian)				
FACIALS & SKIN POLISH				
HAIRCUT - BASIC				
HAIRCUT - MASTER				
HAIR COLOR & HIGHLIGHTS				
PARTY MAKEUP				
PARTY HAIR STYLING				
BRIDAL MAKEUP				
BRIDAL HAIR STYLING				
HAIR UPDO				
BLOWOUT & BLOWDRY				
HAIR STRAIGHTENING & PERM				
SELLING SKILLS (PRODUCTS & SERVICES)				
MAINTAINING SELF-APPEARANCE & GROOMING				

AUTHORIZATION

ALL APPLICANTS READ BELOW BEFORE SUBMITTING THIS APPLICATION

I authorize investigation on all statements contained in this application. I certify that the information given on this application and on any supporting documentation is true. I understand that misrepresentation or material omission made by me on this is cause for dismissal. Further, I understand and agree that my employment is for no definite period, and may, regardless of the date of payment of my wages and salary, be terminated at any time without cause or notice.

By my signature below, I certify that I understand these conditions of employment and that all entries on this application are true and complete to the best of my knowledge.

Signature of Applicant

Date