

Daylily Spa Salon Employment Application

Date _____

Position Applied For: _____

Full Name _____

Address _____

Home Telephone _____ Cell Phone _____

Email Address _____

Date Available To Start _____

Days and Hours Available to Work: _____

Number of Hours Desired Per Week _____

Salary Desired _____

Education _____

High School _____ Date of Graduation _____

College or Technical _____

Dates of Attendance and Graduation _____

How were you referred to Daylily?
Newspaper Ad/ Aveda website/Daylily website/ School Posting/
Daylily Team Member (name)_____ Other_____

Employment (List most recent position first)

Employer Name _____ **City & State** _____

Supervisor Name _____ **Telephone** _____

Position Held _____ **Dates of Employment** _____

Reason for Leaving _____ **Salary** _____

Employer Name _____ **City & State** _____

Supervisor Name _____ **Telephone** _____

Position Held _____ **Dates of Employment** _____

Reason for Leaving _____ **Salary** _____

GENERAL

May we contact your current employer? Y N

Will you be able to perform the essential job functions of the position you are applying for with or without reasonable accommodation? Y N

Have you ever been convicted of a crime, excluding petty misdemeanors and summary offenses, which has not been annulled or expunged by court? Y N

The above information is true and correct. I understand that in the event of my employment by Daylily Inc. I shall subject to dismissal of any if any information that I have give in this application is false or misleading, or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize Daylily to inquire into my education, professional, and past employment history. I hereby give consent to any former employer to provide employment related information about me to Daylily Inc, and will hold Daylily and my former employer harmless from any claim made on the basis of such information obtained.

Signature _____ **Date** _____