

Head 2 Toe Spa Application

Full Name: _____

Current Address: _____
Number Street City State Zip Code

Phone Number: _____ Email: _____

Social Security #: _____

Are you legally able to work in the US? Yes No Are you a military Veteran? Yes No
Do you have a valid driver's license? Yes No Do you have reliable transportation? Yes No

Have you been told the essential functions of the job or have you viewed a copy of the job description listing the essential functions of the job? Yes ☐ No ☐

Can you perform these essential functions of the job with or without reasonable accommodation? Yes ☐ No ☐

Employment Desired (Please enter times that you are available to work)

Day	Sun	Mon	Tues	Wed	Thur	Fri	Sat
From							
To							

Position applying for: _____

Date available to start: _____

Desired hourly: _____

Total hours available per week: _____

Are you available for work: ☐ Full-Time ☐ Part-Time ☐ Shift- Work ☐ Seasonal

Education

Do you have a highschool diploma or GED/HiSET? Yes No

Circle highest grade completed: 6 7 8 9 10 11 12 13 14 15 16 17 18

College Name	Major	Minor	Degree/Cert	Received?

Area of concentration and/or degree(s), certificate(s), license(s): _____

Other training or skills (special courses, computer skills, etc.): _____

Security

Have you been convicted of a criminal offense(s)? Yes No

If yes, explain:

Other

You may include more details of your choice here:

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application. I acknowledge and understand that the company is an “at will” employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

Signature: _____

Date: _____