

EMPLOYMENT APPLICATION



ēthos  
DAY SPA

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You may not be considered for employment if you fail to completely answer all of the questions on this application. Please attach your resume to this document and send to ethosdayspa@gmail.com

Position applying for: \_\_\_\_\_

Name (First, Last, Middle): \_\_\_\_\_

Street address or Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_ Alternative phone: \_\_\_\_\_

Date you're available to start if hired: \_\_\_\_\_

Position Information

Hours:  Full Time     Part Time     Days     Evenings  
           Weekdays     Weekends     Both     Whenever!  
Status:  Regular     Temporary

Are you authorized to work in the U.S. on an unrestricted basis?  Yes     No

Have you ever been convicted of a crime?  Yes     No

Please Explain:

\_\_\_\_\_  
\_\_\_\_\_

\*This may not necessarily disqualify you as an applicant\*

Have you seen the job description and know the essential functions of the job?  Yes     No

Can you perform the essential functions of this job?  Yes     No

Qualifications

Please list any education or training that you feel relates to the position that you're applying for. This would include school, certifications, training, etc.

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Do you have any other special skills that you feel would help you in the position that you're applying for? (Leadership, organizations/teams, etc.).

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Why do you want to work at Ethos?

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Work History

Company name: \_\_\_\_\_ Title: \_\_\_\_\_

Start Date: \_\_\_\_\_ End date: \_\_\_\_\_

Company location: \_\_\_\_\_

Supervisor name: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Company name: \_\_\_\_\_ Title: \_\_\_\_\_

Start Date: \_\_\_\_\_ End date: \_\_\_\_\_

Company location: \_\_\_\_\_

Supervisor name: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

References

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

Relationship: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

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

Relationship: \_\_\_\_\_