



walter claudio
 An Aveda Lifestyle Salon Spa
 11 W. Figueroa St.
 Santa Barbara, CA. 93101

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Application for Employment

(please print)

***Important:** Please read each question carefully and provide an honest and complete answer. In order for you to be considered for employment, your application must be fully completed.

Today's Date			
Name			
Contact Phone Number		Email address	
Address, City, State & Zip			
Area Code & Phone Number			
Driver's License Number		Issuing State	
Social Security Number			
Are you 18 years or older?			
Have you ever been convicted of a felony, state or federal?	<i>If yes, please explain. If additional space is needed, please attach another sheet.</i>		

Note: Conviction of a felony will not necessarily preclude employment. Walter Claudio will consider factors such as the type of offense, age at the time of the offense, when the offense occurred, and rehabilitation when determining suitability for employment.

Referred By:				
Division & Position you are Applying For	Check One	Division	Specify Position	City / State
	<input type="checkbox"/>	Guest Services/Retail Store		Santa Barbara, CA
	<input type="checkbox"/>	Salon-Hair		Santa Barbara, Ca
	<input type="checkbox"/>	Spa		Santa Barbara, CA
Date available to begin:				
Part Time or Full Time				
Salary Requesting				

Education				
	School Name Address	Graduated Y/N	Highest Grade	
High School				
Vocational School				
College / University				
Graduate School				
	Degree Earned		GPA	
	Minor		GPA	
	Major		GPA	
Describe all special skills, qualifications, and training which you feel would be beneficial to you in this position:				

List last four consecutive positions held, beginning with present or last employer: This section is mandatory. Please complete regardless of resume.

Employer				
Dates	From:		To:	
Address				
Position				
Reason For Leaving				
Reference				
Phone Number				

Employer				
Dates	From:		To:	
Address				
Position				
Reason For Leaving				
Reference				
Phone Number				

Employer				
Dates	From:		To:	
Address				
Position				
Reason For Leaving				
Reference				
Phone Number				

Employer				
Dates	From:		To:	
Address				
Position				
Reason For Leaving				
Reference				
Phone Number				

Certification

I certify that the answers given are true and correct to the best of my knowledge. I authorize Walter Claudio to investigate any representations made by me, either oral or written, during my application for employment, and to conduct a complete investigation into my background. I understand that Walter Claudio may contact individuals or organizations other than those I have provided as a reference in this process. I hereby authorize and direct each such prior employer or other source of information to answer any questions regarding my prior employment background. I hereby release all employers, companies, corporations, credit bureaus, law enforcement agencies, schools, or other persons from any and all liability in responding to inquiries in connection with this application.

In the event of employment, I understand that false or misleading information given in this application (or in any interviews prior to employment) may result in my discharge. In the event of employment, I understand and agree that the employment is entered into voluntarily, and I may resign at anytime. I also understand my employment may be terminated by Walter Claudio for any reason, and at anytime, without previous notice. I further understand that the at-will nature of my employment cannot be altered by any oral agreement or understanding.

Your signature on this application constitutes an acknowledgement that you understand you can be subjected to drug testing during your employment with Walter Claudio and your consent to undergo such testing in accordance with Walter Claudio's policies.

I HEREBY REPRESENT AND WARRANT that I have read and fully understand the foregoing and seek employment under these conditions of my own free will.

Signature: _____ **Date:** _____