

## Frizzles Application

Complete this application. Save and e-mail it to [frizzles.OLDTOWN@gmail.com](mailto:frizzles.OLDTOWN@gmail.com). Type Application in the Subject line. If need be, please attach additional information as a separate Word document.

Date:

Name:

Address:

City:

State:

Zip:

Ph #:

Email:

### Education Information

*Check all that apply and list below*

High School

College

Trade School

Name of School:

Graduated?

Years Attended:

### Position Information

Hair Stylist

Stylist Assistant

Shampoo Tech

Esthetician

Front Desk Staff

### Employment History

Employer:

Position:

Start/End:

Salary:

Reason for  
Leaving:

### References

Name:

Phone Number:

Name:

Phone Number:

Name:

Phone Number:

Your application is completely confidential. If you seem like a good fit for our salon, we will contact you within 1 week of your application submission. Thank you for your interest