



Date: _____

I. PERSONAL INFORMATION (Please print)

Last Name: _____ First Name: _____ Middle Initial: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Position applied for: _____

How did you learn about the position? _____

Are you available to work: Full Time Part Time Daytime Evening

If you are offered employment, what date would you be available to begin work? _____

Have you ever been convicted of, entered a guilty plea or nolo contendere to a crime. Yes No

If yes, please explain. _____

Volunteer Activities (list organization, type of service, dates): _____

Hobbies, Sports, Interests: _____

II. EDUCATION

High School/College:

Name of School	City and State	Dates Attended	Date of Graduation

III. PERSONAL REFERENCES (Provide 3 references that are not family members)

1. _____
Name Years Known Telephone Number

2. _____
Name Years Known Telephone Number

3. _____
Name Years Known Telephone Number

IV. SKILLS AND KNOWLEDGE

Check next to the skills/knowledge that you have. Enter the number of years of experience and mark the column of your proficiency level. List any other skills/knowledge that may be useful for the position that you are seeking.

Skill/Knowledge	Years of Experience	Excellent	Good	Fair
Filing				
Customer Service Experience				
Answering Phones				
Cash Handling				
Computers (MS Windows OS)				
Email				
Document Editors (MS Word, Google Docs, Etc.)				
Internet Browsers (Chrome, Firefox, MS Edge, Etc.)				
Database/Data Entry				
Other:				
Other:				

V. EMPLOYMENT EXPERIENCE (Start with your most recent employer)

- Employer: _____ Date Employed: _____ To: _____
 Address: _____
 Telephone Number: _____ Supervisor: _____
 Your Job Title: _____ Reason for Leaving: _____
 Starting Hourly Rate/Salary: _____ Final Hourly Rate/Salary: _____
- Employer: _____ Date Employed: _____ To: _____
 Address: _____
 Telephone Number: _____ Supervisor: _____
 Your Job Title: _____ Reason for Leaving: _____
 Starting Hourly Rate/Salary: _____ Final Hourly Rate/Salary: _____
- Employer: _____ Date Employed: _____ To: _____
 Address: _____
 Telephone Number: _____ Supervisor: _____
 Your Job Title: _____ Reason for Leaving: _____
 Starting Hourly Rate/Salary: _____ Final Hourly Rate/Salary: _____

I certify that all information provided in this employment application is true and complete. I authorize Alpha School of Massage, Inc. to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding myself.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

Signature: _____ **Date:** _____