Body Balance Massage and Float

Application For Employment

Please fill this application out completely even if this information is on your resume. Thank you!

You will be considered for employment without regard to your race, color, creed, sexual orientation, religion, marital status, national origin, status with regard to public assistance, disability, or age.

PLEASE PRINT

A. Personal Information	
Full Name	Date
Phone # Email	ail
Address	
How long have you lived there?	
Have you ever pled "guilty" or "no contest" to	, or been convicted of a crime? Y / N
If yes, please provide date(s) and details	
*Answering "yes" to these questions does not constitute ar as date of the offense, seriousness and nature of the violar will be taken into account.	
B. Employment Information	
Position Desired?	Salary Desired?
Are you currently employed Y / N Where	
Date available for work	_
Days absent from work last year due to sickne	ess_

What type of work schedule do you prefer:			
	Sunday	to	
	Monday	to	
	Tuesday	to	
	Wednesday	to	
	Thursday	to	
	Friday	to	
	Saturday	to	
For massage therapists- How many hours of massage can you do before you need a break?			
How many hours of massage can you do in a day without overdoing it?			

C. Education	Name and location	Major	Did you graduate	Degree	Attended from-to
High school					
College or University					
Other					

List specific training education or experience which will assist you in the job for which				
you have applied:				
Any professional lice	nses			
Current license #		State issued	d	
D. Employment History List most recent chronologically	1	2	3	
Company Name				
Address				
Phone Number				
Name of supervisor				
Dates of employment				
starting/ending wage				
Duties				
Reason for Leaving				

Work: May 2014 - august 2014 Religious Sabbatical: august 2014 - august 2016)				
E. <u>Personal References</u>				
Name	Phone	Title		
*By signing I am stating that all statements made on this application are true to the best of my knowledge and belief and that I am physically and mentally capable of performing the duties I am being hired to be responsible for. If I have submitted any false information, it is cause for termination.				
Signature:	D	ate:		

List your complete professional life activities for the past three years (work, school, time off,

military,etc.)

(EXAMPLE- School: Sept 2013 - may 2014