



Please download this application and provide your typed responses to the questions in the text fields below. Then save and submit the completed application as a pdf file via email to info@maisiedunbarspalounge.com with a subject header entitled **"Employment Application"**.

Also feel free to print out this application and provide your responses in writing if unable to type. You can bring the application with you upon visit for a interview, which can be scheduled by calling **301 585 4770**.

Your Full Name

Home Address
City, State, Zipcode

Best Contact Number

Email Address

Current Name of Salon/
Spa where you work &
how long have you worked
there

Work Address
City, State, Zipcode

Current or Past
Job Position or Title

Please leave text fields blank for questions that do not apply.

Talk about your background in this industry

How long have you been in this industry?

What is most important to you in your next job? What expectations do you have?

Why did you apply for this position?

What are **three** goals you have for your business over the next 12 months?

1

2

3

How do you plan to reach these goals?

Where would you like to be in 5 years?

What works to motivate you?

What were your reasons for leaving your last job?

What did you like best about your job?

What are **three** things drove you crazy in your last job?

1

2

3

What do you most want to get out of working at our Salon/Spa?

How will we know if our place of business is working for you?

How will we know if you are stuck?

Do you have reliable transportation?

Yes No

How were you paid in your last or current job?

Commission If checked, Percentage Paid?

Booth Rental If checked, Rent Paid?

Salary If checked, Salary Paid?

How many days and hours do you currently work per week?

How many days and hours would you like to work per week?

What are your average weekly service & retail sales?

Service	<input type="text"/>	Retail	<input type="text"/>
---------	----------------------	--------	----------------------

What is your average weekly Client Count?

What is your current fee for the following?

Manicure	<input type="text"/>	Pedicure	<input type="text"/>
Facial	<input type="text"/>	Massage	<input type="text"/>
		Other	<input type="text"/>

How much of your business would you say is:

Nails	<input type="text"/>	Products	<input type="text"/>
-------	----------------------	----------	----------------------

What method of tracking do you use for your business?

<input type="checkbox"/> Computer	<input type="checkbox"/> Manual Client Cards
<input type="checkbox"/> Memory	<input type="checkbox"/> No System

Do you do any of the following?

<input type="checkbox"/> Newsletter	If checked, how often?	<input type="text"/>
<input type="checkbox"/> Client Follow-up	<input type="checkbox"/> Birthday Cards	
<input type="checkbox"/> Holiday Cards	<input type="checkbox"/> Conformation Calls	

What do you need to earn?

What do you want to earn?

What retail lines do you currently sell?

What is your favorite type of client, and why?

What is your least favorite type of client, and why?

Why would a client select you over another technician? What makes you special?

How would you deliver extraordinary service?

What are **three** things you most want to accomplish in your lifetime?

1

2

3

If you could travel anywhere, where would you want to go?

If money was not an issue, and fear was not present, what would you dare to do?

What would stop you from doing it?

What would motivate you to do it anyway?