



Join Team Satori – Career Application

General Information

Name: _____

Address: _____

Phone: _____

Email: _____

What position(s) are you applying for? (Check all that apply)

1. stylist
2. nail tech
3. esthetician
4. massage therapist
5. client coordinator

Are you currently licensed in New York State? Yes / No

License # _____

What is your highest Level of Education? (Check all that apply)

1. high school
2. college
3. trade
4. other licenses and certifications (please list) _____

Previous employment

1. Company Name _____

Dates of Employment: from _____ to _____

Ending Salary \$ _____

Job Title _____

Responsibilities (please list) _____

Supervisor Name _____

May we contact supervisor for a reference? Yes No

2. Company Name _____

Dates of Employment: from _____ to _____

Ending Salary \$ _____

Job Title _____

Responsibilities (please list) _____

Supervisor Name _____

May we contact supervisor for a reference? Yes No

3. Company Name _____

Dates of Employment: from _____ to _____

Ending Salary \$ _____

Job Title _____

Responsibilities (please list) _____

Supervisor Name _____

May we contact supervisor for a reference? Yes No

Additional Questions:

1. What particular skills qualify you for this position?
2. What are your goals for the next year?
3. Next five years?
4. Next ten years?

5. Have you ever held a leadership position?

6. How do you feel about community involvement that would require time outside your job and in addition to your scheduled hours?

7. How do you feel about advanced training?

8. What is your greatest strength?

9. What is your greatest weakness?

10. As an employee, what do you expect from managers, supervisors and owners?

11. If you were hired, would any of the following be a problem for you?

Yes	No	participating in training classes outside of working hours
Yes	No	being referred to as a different name if someone at Satori has a similar name
Yes	No	refraining from smoking during shift/breaks or smelling of smoke when at work

12. What days / hours are you available to work?

Days (Check all that apply)

Tuesday Wednesday Thursday Friday Saturday Sunday

Hours (list range)

from (time): _____ a.m. / p.m. to (time): _____ a.m. / p.m.

What date can you start work? _____

Resume attached? Yes No