



2014 Shelly Drive  
Indiana, PA 15701

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Availability:**

Monday:	Friday:
Tuesday:	Saturday:
Wednesday:	Sunday:
Thursday:	

Nail Technician/Cosmetology License # \_\_\_\_\_

Are you presently employed: \_\_\_\_\_ Date you can begin: \_\_\_\_\_

**EDUCATION:**

Name of Cosmetology School \_\_\_\_\_

Address \_\_\_\_\_

Date Started \_\_\_\_\_ Date Graduated \_\_\_\_\_

As a qualified nail technician, what are your areas of expertise? (Acrylics, Manicure/Pedicure, Etc)

\_\_\_\_\_

Do you have work samples/portfolio that can be viewed online? If so where?

\_\_\_\_\_

Please list any advanced courses and training you have attended:

\_\_\_\_\_

**EMPLOYMENT HISTORY:**

Employer \_\_\_\_\_ Phone # \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employed From/To: \_\_\_\_\_ Compensation/Salary: \_\_\_\_\_

Duties Performed: \_\_\_\_\_

Employer \_\_\_\_\_ Phone # \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employed From/To: \_\_\_\_\_ Compensation/Salary: \_\_\_\_\_

Duties Performed: \_\_\_\_\_

**REFERENCES:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Title/Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Title/Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Title/Relationship: \_\_\_\_\_

**Applications can be:**

**Faxed to: 724-727-2800**

**Emailed to: [Xclusivenailsalon@gmail.com](mailto:Xclusivenailsalon@gmail.com)**

**-OR-**

**Submitted in person to:**

Bronze Fx Tanning  
1570 Oakland Avenue  
Indiana, Pa 15701

Bronze Fx Tanning  
938 Oakland Avenue  
Indiana, Pa 15701