

MAURICEMEADE

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SALON CO-ORDINATOR APPLICATION FORM

Date:/...../.....

Name: Phone Number: (.....).....

Address:

Date of Birth:/...../..... Email Address:

Have you worked in the Beauty industry before?

Current Employment:

What interests you about working in the Hairdressing Industry?.....

This position requires you to lead staff, how would you feel about delegating work duties?

Briefly describe your previous public relations / customer service experience.

Have you had any experience with Make up e.g. sales or application?

Future aspirations?

Do you have any health problems that may prevent you for standing for long periods of time? Yes / No.....if yes please comment