

MAURICEMEADE

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STYLIST APPLICATION FORM

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

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

Address:

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

Education Level Attained:

Hairdressing Experience:

Last Employer:

What interests you most about the Hairdressing Industry?

What are your Hairdressing strengths?

Which Hairdressing products are you experienced in?

Future aspirations?

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

Please circle the type of employment you are looking for Permanent / long term, Permanent /part time, short term / casual.

Please fax this form with your current resume to 08 9382 4434 or send it to Maurice Meade Shop 9/127 Rokeby Rd, Subiaco Western Australia 6008.