



INDEPENDENT CONTRACTOR APPLICATION

www.beyondmeasurebarbering.com

Barberz barbershop is an equal opportunity employer and does not discriminate against any applicant or contractor because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Barberz complies with applicable state laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Barberz also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

APPLICANT INFORMATION										
Last Name			First			M.I.		Date		
Street Address					Apartment/Unit #					
City				State		ZIP				
Phone				E-mail Address						
Date Available			Social Security No.			Desired Booth				
Position Applied for										
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, explain			
Are you a licensed professional in NC?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, license #			
BARBER EDUCATION										
School			Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		CERT.
College			Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree
Other			Address							
From		To		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree
REFERENCES										
<i>Please list three personal or professional references.</i>										
Full Name					Relationship					
Company					Phone					
Address										
Full Name					Relationship					
Company					Phone					

PREVIOUS EMPLOYMENT			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to placement, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date