



PLEASE CHECK THE LOCATION YOU ARE APPLYING AT:

- | | |
|--|--------------|
| <input type="checkbox"/> 825 S. RURAL ROAD, TEMPE, AZ 85281 | 480-774-2582 |
| <input type="checkbox"/> 1423 S. COUNTRY CLUB DRIVE, MESA, AZ 85210 | 480-464-2582 |
| <input type="checkbox"/> 4255 N. WINFIELD SCOTT PLZ, SCOTTSDALE AZ 85251 | 480-874-2582 |
| <input type="checkbox"/> 3663 LAS VEGAS BLVD S LAS VEGAS, NV 89109 | 702-363-2582 |
| <input type="checkbox"/> 3535 LAS VEGAS BLVD S LAS VEGAS, NV 89109 | 702-364-2582 |
| <input type="checkbox"/> 15656 N. HAYDEN RD SCOTTSDALE, AZ 85260 | 480-398-2527 |

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|---------------------------|---------------|-------------|--|--|
| NAME: | | | PHONE NUMBER: | |
| | | | CAN YOU RECEIVE TEXT MESSAGES? YES / NO | |
| PRESENT ADDRESS: | | | FACEBOOK URL: | |
| | | | INSTAGRAM URL: | |
| CITY: | STATE: | ZIP: | HOW DID YOU HEAR ABOUT CLUB TATTOO? | |
| PERMANENT ADDRESS: | | | | |
| | | | SPECIAL INTERESTS/TRAINING: | |
| CITY: | STATE: | ZIP: | | |

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|---|---|
| ARE YOU CURRENTLY EMPLOYED? YES / NO | MAY WE CONTACT YOUR PRESENT EMPLOYER? YES / NO |
| HAVE YOU EVER APPLIED AT THIS COMPANY BEFORE? YES / NO | NAME OF SUPERVISOR: |
| IF SO, WHEN: | PHONE NUMBER: |
| DID YOU APPEAR FOR AN INTERVIEW? YES / NO | |

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| ARE YOU BILINGUAL? YES / NO | DO YOU HAVE YOUR OWN TRANSPORTATION? YES / NO |
| WHAT LANGUAGE: | ARE YOU 21 YEARS OF AGE? YES / NO |

| EDUCATION HISTORY | NAME AND LOCATION OF SCHOOL | YEARS ATTENDED | YEAR GRADUATED? | SUBJECTS STUDIED |
|-----------------------------|-----------------------------|----------------|-----------------|-------------------|
| HIGH SCHOOL CITY, STATE | | | | GENERAL EDUCATION |
| COLLEGE CITY, STATE | | | | |
| TRADE SCHOOL CITY, STATE | | | | |

| WHAT HOURS ARE YOU AVAILABLE TO WORK: | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY | SUNDAY |
|---------------------------------------|--------|---------|-----------|----------|--------|----------|--------|
| | | | | | | | |

*LIST YOUR MOST CURRENT POSITION FIRST, THEN GO BACKWARD IN TIME.

| DATES WORKED MONTH AND YEAR | NAME OF COMPANY CITY, STATE | SALARY | POSITION | REASON FOR LEAVING |
|--------------------------------|--------------------------------|--------|----------|--------------------|
| FROM: | | | | |
| TO: | | | | |
| FROM: | | | | |
| TO: | | | | |
| FROM: | | | | |
| TO: | | | | |
| FROM: | | | | |
| TO: | | | | |

I certify that the facts contained in this application are true and complete and understand that, if employed, falsified statements on this on this application shall be grounds for dismissal. I authorize investigation off all statements contained herein and the employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

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| APPLICANT SIGNATURE: | DATE: |
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