



Employment Application

507-334-1714
www.sunsetsalon.com
sunset@sunsetsalon.com

Personal Information

First Name: Last Name:

Nationality: Date of Birth:

Email: Phone:

Address:

Position Information

Applied position: Start date:

Division: Desire Salary:

Educational Background

Degree	Institution	Completion Year
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<input type="text"/>	<input type="text"/>	<input type="text"/>
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Professional Background

Company Name	Job Title	Responsibilities	Work Duration
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Attachments: Resume/CV Attachment Cover Letter Attachment

Declaration:

By applying, I confirm the accuracy of the provided information. I understand that any false statements may disqualify me from employment.

Signature