D'Ametri's Aveda Employment Application Name vou would like to be called:

Full Name		Name you w	ould like to be o	called:
Address				
Stree		City	State	Zip
Home Phone				
Optional: Age N	1arital Status	No. of Children	Ages _	
Do you have reliable tra	nsportation?			
What position are you a	pplying for?			
Why have you applied t	o D'Ametri's? _			
Why do you feel you wo	ould be an asset	to D'Ametri's?		
Have you worked for a employment:		•		length of
What did you not like a	bout your last e	mployment?		
Have you had advanced	l experience or	training? If y	es, please descr	ibe:
Have you held leadersh briefly describe:				oups, etc.? If yes,
What is your goal in life				
What are some of the t	nings you would	like to achieve during	the next year?	
Why weren't you able to	o achieve this g	oal before?		
If you were to qualify for challenge? If so, why?	or this employm	ent opportunity, would	d any of the iten	ns below be a
- ,	30 a.m. to 7:30	p.m		
		g hours		
Are you looking for a ca				
Anything else?				