

Application For Apprenticeship in Hairdressing

Thank you for your interest in Mandies Hair Studio. Please be ensured that all information given in this application form will be treated as strictly confidential.

- Read through this application form carefully, answering all questions with as much information as possible.
- Complete the form in black ink or print and do not amend in any way.
- PLEASE USE CAPITAL LETTERS.

Mandies Hair Studio aims to be an Equal Opportunities Employer. It is our policy to ensure that all applicants receive equal consideration and appointments are made on merit.

Our Vision:

PASSIONATE • PROFESSIONAL • CREATIVE • UNIQUE

Full Name:
Age:
Date of Birth:
Address:
Postcode:
Telephone Number:
Email Address:
National Insurance Number:

Date of Application:	
Position Applied for:	
Where did you hear about Mandies Hair Studio	

Ethnic Origin	✓	Age	✓	Gender	✓
Black African		0-16		Male	
Black Caribbean		17-20		Female	
Black Other		21-25			
Bangladeshi		26-30			
Indian					
Irish					
Pakistani					
Chinese					
White					
Other					

Health

Do you consider yourself to have a disability?	
Would the provision of any aids or modification assist you in carrying out the duties of a hairdresser?	
Is there anything we need to know about your disability in order to offer you a fair selection interview? E.g. do you need a signer or an accessible interview room?	

Why do you want to be a Hairdresser?

Please tell us why you would like to complete an Apprenticeship in hairdressing?

What are your career aspirations?

(This information is essential for selection purposes)

What qualities do you feel you have to be a successful hairdresser?

(This information is essential for selection purposes)

Education and Qualifications (This information is important please ensure you complete.)

Name of School/College	Dates Attended		Subjects studied and level	Predicted/Actual Grades
	From	To		

Employment and Training (This information is important please ensure you complete.)

Please tell us about any work experience, weekend or holiday jobs and if you have experienced any other training in hairdressing or any other area

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References

Please give the name and address of two people (not members of your family) who would act as referees.

Name:	Name:
Address:	Address:
Telephone No:	Telephone No:
Occupation:	Occupation:
Can we contact the above referees prior to interview? Yes/No	

Please print, complete, scan and email this application form back to

Mandyreed10@aol.com
Mandies Hair Studio
8 Southwray
Newhaven
East Sussex
BN9 9LL

Telephone: 01273 513204
Email: mandyreed10@aol.com

Declaration

I declare that the information given in this application is, to the best of my knowledge, accurate in all respects. I understand that giving false information or omitting relevant important information will make my application unacceptable.

Signature: _____ Date: _____

Mandies Hair Studio actively supports equality of opportunity and welcomes applications from all sectors of the community.
If you have any special needs such as mobility needs please let us know prior to interview and we will endeavour to make alternative arrangements for interview. Good luck!