

## MODEL APPLICATION FORM

Date Received/Updated: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

NAME: \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

Please list one reference (preferably a current or former employer, not a friend or family member.)

REFERENCE NAME: \_\_\_\_\_ COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

How did you hear about the Scottsdale Artists' School? \_\_\_\_\_

Have you ever worked for us before? If so, when? \_\_\_\_\_

The following information helps us determine whether you fit the needs we have for models in our fine art classes. *If any category listed below makes you feel uncomfortable, you need not respond to that category.* However, the more information you provide, the more opportunities we have to possibly place you in a classroom.

MALE                      FEMALE                      NON-BINARY                      TRANSGENDER

RACE/ETHNICITY: \_\_\_\_\_ AGE: \_\_\_\_\_

HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ HAIR COLOR/LENGTH: \_\_\_\_\_

COMPLEXION (ex. fair, dark, etc.): \_\_\_\_\_

What kind of modeling are you willing to do?      PORTRAITS       NUDE FIGURE       COSTUME

Do you have any tattoos, piercings, etc.? Please describe if applicable: \_\_\_\_\_

**Hours of Availability:** Please check when you are available &/or write "NO" in time slots you are unavailable

DAY	8:30AM-12:00PM	12:30PM-4:00PM	6:00PM-9:30PM
MONDAY			
TUESDAY			
WEDNESDAY			
THURSDAY			
FRIDAY			<b>Not Open</b>
SATURDAY			<b>Not Open</b>