

The Piperazzi 591 E. Plaza Circle P.O.Box 2016 Litchfield, Arizona 85340

## PLEASE INCLUDE 2 PHOTOS WITH THIS APPLICATION 1 HEADSHOT, 1 FULL BODY Email to <a href="mailto:thepiperazzi@yahoo.com">thepiperazzi@yahoo.com</a>, Mail to the address above or Text to 602-501-4787

Applicant Information							
Full Name:						Date:	
	Last	First			M.I.		
Address:							
, 144, 555.	Street Address					Apartment/Unit #	
	City				State	ZIP Code	
Phone:		E	Email_				
Date Availa	uble: S	ocial Security No.: <b>Not</b>	Applic	able	Desired	Salary: Varies Per Eve	nt_
Position Applied for: Promotional Model and Events							
Are you a c	itizen of the United States	YES NO	If no,	are you a	authorized to v	YES vork in the U.S.?	NO
YES NO Have you ever worked for this company?     YES NO   If yes, when?							
YES NO Have you ever been convicted of a felony?							
If yes, explain:							
Education							
High Schoo	ol:	Address:					
From:	To:	_ Did you graduate?	YES	NO	Diploma:		
College:		Address:					
From:	To:	_ Did you graduate?	YES	NO	Degree:		
Other:		Address:					
From:	To:	_ Did you graduate?	YES	NO	Degree:		
References							

Please list three pro	ofessional references.				
Full Name:				Relationship:	
Company				Phone:	
Address:					
Full Name:				Relationship:	
Componi				Phone:	
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Address:					
	Previous E	Employme	ent		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	Ending Salary:\$			
Responsibilities:					
From:	To:	Reason fo	or Leaving:		
May we contact your	r previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S	Salary: <u>\$</u>		Ending Salary:	
_	To:				
May we contact you	r previous supervisor for a reference?	YES	NO		
Company:				Phone:	
۸ ما ما مع مـ م .				Supervisor:	
Job Title:	Starting S	Ending Salary:			
Responsibilities:					

From: 10:	Reason for Leaving:						
May we contact your previous supervisor for a reference?	YES	NO					
Military Service							
Branch:		From:	To:				
Rank at Discharge:	Type of Discharge:						
If other than honorable, explain:							
Disclaimer and Signature							
I certify that my answers are true and complete to the best of my knowledge.							
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.							
Signature:			Date:				