DONALD SCOTT NYC RAT PACK APPLICATION

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CONTACT INFO	DAT Z
Name:	7
Mailing Address:	S DAT (A
Phone:	RAI ol
Home-	
Work-	2 PACK E
\Mobile	2
Email address:	(O)
	ARTISTR
SKILLS (select all that apply):	
Cutting	
Color	
Styling	
Barbering	
Other	
CLIENTS:	
Women	
Men	
Children	
EMPLOYMENT:	
Current employment:	
Dates	
Positon	
Average hours per week	
Salon name and location	
Prior employment:	
Dates	
Position	
Salon name and location	
EDUCATION	
Beauty School(s)	
Graduation date	
CERTIFICATION	
Are you currently a certified stylist?: Yes No	
If no, why?	
If yes, in which state are you certified?	

GENERAL QUESTIONS

Have you ever used a Donald Scott NYC razor tool?
If yes, which ones do you use and how often?
Why do you want to be a Donald Scott NYC RAT PACK member?
What do you enjoy most about being a stylist?
What inspires you creatively?
Have you ever been an educator before? If so, for which companies and brands?
Do you feel comfortable talking and presenting/conducting a demo to a small group? How about a large group?
What are your professional goals?

Please submit this completed application, along with a photo of yourself and a sample of you work to : RAT PACK @ DONALDSCOTTNYC.COM

A member of the team will get back to you within 10 working days.