



Donavon Modeling

Model Biographical Data Form

OFFICE USE ONLY

WEB PROMOTIONAL NAME

COMP PROMOTIONAL NAME

MODEL FILE NUMBER

INSTRUCTIONS: *PRINT* Clearly in Ink. Answer *All Applicable* Questions. *SIGN* and *DATE* Page 2. Information provided here will be used by Donavon Modeling for those purposes described at the end of this form. With the exception of **BOLDED** items, information on this form is considered strictly confidential and will **NOT** be released to third parties without permission of the model (or parent/guardian if model is under 18). Aranessa Modeling reserves the right to publish **BOLDED** items **ONLY** in electronic and/or conventional formats for purposes of commercial, promotional and advertising applications.

1. **Name** (Last / **First** / MI): _____ / _____ / _____

2. **Address:** Street: _____
Apartment /Route #: _____ P.O. Box: _____
City / State (Province): _____ / _____
Country / Zip Code: _____ / _____

3. Home phone #: (_____) _____ SSN: _____ - _____ - _____

4. E-mail address: _____ Fax #: (_____) _____

5. Pager #: (_____) _____ Cell phone #: (_____) _____

6. **Birth Date:** ____/____/____ **Zodiac Sign:** _____ **Birth Place:** _____

7. **Nationality:** _____ **Race:** _____ **Sex (M/F):** _____

8. Education (*Highest* level attained): _____

9. If a graduate *or* student; Name of school: _____

Major: _____ Current year (Fr/So/Jr/Sr): _____

10. Occupation: _____ Marital status: _____

11. Employer: _____ Work phone: (_____) _____

12. Employer address: _____

13. Measurements:	(FEMALE)	(MALE)	(CHILD)
Bust / Cup:	_____ / _____	Sleeve / Collar:	_____ / _____
Waist / Hips:	_____ / _____	Waist / Inseam:	_____ / _____
Height / Weight:	_____ / _____	Height / Weight:	_____ / _____
Dress / Shoes:	_____ / _____	Suit / Shoes:	_____ / _____
			Shoes: _____
			Ht: _____
			Wt: _____
			Size: _____

14. **Hair:** (Color / Length / Description): _____ / _____ / _____

15. **Eye color:** _____ **Complexion** (Dark, Medium, Light): _____

16. **Distinguishing marks** (Tattoos, Piercings, Scars) (Describe): _____

17. Do you *ever* wear: Glasses? _____ Contacts? _____ Braces? _____

18. Do you possess a current passport? _____ Are you willing *and* available to travel worldwide? (If not, explain): _____

Additional Comments:

