



2008 Texture Paint Apprentice Program Application Form

Your Name:

First Last

Address:

Street Apartment #

City State/Province

Country Zip/Postal Code

Phone#: (____) _____
Area Code

E-Mail Address: _____

Questions:

1. Submission Deadline Date? _____

2. Program Start Date? _____

3. Why does this program interest you?

4. Tell us about your problem solving abilities?

5. What strengths do you bring to a team?

Application Form (Cont.)

6. What are your short and long-term career goals?

7. On a scale of 1 to 5 with 5 as the highest rating, how do you rate your knowledge of Body Paint and /or Deep paint?