Applicant Information
Full Name:
Phone Number:
Email Address:
Website/Portfolio (if applicable):
LinkedIn or Professional Social Media (if applicable):
Professional Background
What is your primary artistic discipline? (Check all that apply)
[] Visual Arts (Painting, Drawing, Mixed Media, etc.)
[] Performing Arts (Theatre, Dance, Improv, etc.)
[] Music & Sound Arts
[] Literary Arts (Creative Writing, Poetry, Storytelling)
[] Other:
Highest Level of Education:
[] Bachelor's Degree in
[] Master?s Degree in
[] Other:
Teaching Experience (Years of Experience):
[] 1-3 Years
[] 3-5 Years
[]5+ Years
Have you taught children?s workshops, classes, or school programs before?
[1 Vac (Whora?

[] No, but I am eager to learn		
Please list any relevant certifications (CPR, teaching credentials, etc.):		
Short Answer Questions		
Why do you want to work as a Teaching Artist at Creative Arts Workshop?		
Describe your teaching philosophy when working with children in the arts.		
What age groups have you worked with? Do you have a preferred age range?		
What is your approach to classroom management and fostering a creative learning environment?		
Describe a successful arts project or workshop you have led.		

Availability & Logistics

Which days are you available? (Check all that apply)

[] Monday	
[] Tuesday	
[] Wednesday	
[] Thursday	
[] Friday	
Are you interested in:	
[] Leading weekly classes	
[] One-time or seasonal workshops	
[] Special events or artist residencies	
Do you have reliable transportation to Nyack?	
[] Yes	
[] No	
Are you willing to undergo a background check if him	ed?
[] Yes	
[] No	
References	
Please provide two professional references who car	n speak to your teaching and artistic abilities.
Reference #1 - Name:	
Relationship:	
Email:	
Phone:	
Reference #2 - Name:	
Relationship:	

Email:	
Phone:	
Signature	
Applicant Signature:	
Date:	