

**DEPARTMENT OF CULTURAL RESOURCES PERFORMING ARTS INSTRUCTOR APPLICATION**

*Please attach a resume, two professional references, and links to videos or social media that have samples of your work.*

Name: \_\_\_\_\_ Preferred Pronouns: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Is this a new or updated application? **New Updated** Have you taught for Cultural Resources previously? **Yes No**

Can you teach in a language other than English? (If so, please specify) \_\_\_\_\_

Do you have experience teaching students who have disabilities? **Yes No**

If Yes, please describe \_\_\_\_\_

**TEACHING EXPERIENCE (previous teaching experience is strongly preferred)**

Employer: \_\_\_\_\_ Dates of Employment (Mo/Year) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Supervisor's Phone \_\_\_\_\_

Provide a brief job description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Employer: \_\_\_\_\_ Dates of Employment (Mo/Year) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_

Provide a brief job description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Education/Degree (please circle) **BFA MFA BA MA Teacher-Certification**

Major/Minor \_\_\_\_\_

College/University \_\_\_\_\_

**Performing Art classes that you are interested in teaching (please check all that apply)**

Acting  Improv  Comedy  Theater Production  Circus Arts

Ballet  Modern  Hip-Hop  Contemporary  Musical Theatre Dance  Salsa \_\_\_\_\_ (Other)

Spoken Word  Poetry/Creative Writing  Songwriting

Musical Instrument (Type/Level): \_\_\_\_\_

Other: \_\_\_\_\_

**Populations you are interested in teaching (please check all that apply)**

Adults  Teens  Youth (5-12)  Toddler/Parent-Child  Seniors  Special Needs

What days (Mon-Sat) and times are you available? \_\_\_\_\_

Are you willing to teach at off-site locations? **Yes No**

Do you have your own transportation? **Yes No**

Email to:

Jenna S. Ward

[JWard01@savannahga.gov](mailto:JWard01@savannahga.gov)

912-651-6783