



Application for Employment

Art Works Studio offers quality art classes designed specifically for adults and children, in an environment that fosters creativity and promotes self-expression. The focus of the classes will be the exploration of a wide variety of materials and techniques that will result in finished painting, drawing and mixed media pieces. The characteristic of our service will be personal guidance and patient encouragement to bring out each student's unique vision.

Position Applying For: Art Teacher	Name: Last	First
Street Address:		City, State & Zip:
Social Security #	Primary Phone: ()	Secondary Phone: ()
Emergency Contact Name:		Phone: ()
Do you text?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Email:

Teaching Style
Please describe your teaching style

Education & Work Experience			
Please detail your <u>related</u> education and work history. Begin with your education then your <u>current</u> or most recent employer. <u>Attach additional sheets if necessary</u>			
Educational Institution	Dates	Degree(s)	
Dates Employed	Title:	Description of Duties	Organization Name and phone number

Professional References		
Reference Name	Title	Phone #:
Personal References		
Reference Name	Relationship	Phone#

Please mark day and times you would be available to teach							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
9:00-1:00							
1:00-4:00							
4:00-7:00							

Would you be willing to substitute for another teacher? _____

Who can we thank for referring you? _____

What do drink from Starbucks? _____

Draw us a Doodle

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION. I certify that all statements made on this application are true and complete to the best of my knowledge. I hereby authorize Art-Works to investigate any information contained in this application. I understand that false or incomplete statements shall be sufficient cause for disqualification or dismissal. I further understand I may be required to pass a medical examination and/or background investigation prior to appointment.

Applicant Signature: _____ **Date:** _____

Please fax your application to (323) 734-6066

