



## Independent Contractor Application for Music Teachers

To the applicant: Thank you for your interest in our organization. Your application will receive consideration without regard to race, creed, color, sex, age, national origin, disability, or any other protected class status. To enable us to properly and fairly evaluate your application, please answer all of the questions as carefully and completely as possible.

### Personal Data

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone Number ( ) \_\_\_\_\_ Work Number ( ) \_\_\_\_\_

Do you carry your own Worker's Compensation coverage? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you carry your own General Liability coverage? \_\_\_\_\_ Yes \_\_\_\_\_ No

### Your Education

	Name	City/State	Yrs. completed	Graduate?	Degree
College	_____	_____	_____	_____	_____
Graduate School	_____	_____	_____	_____	_____
Other Special Training	_____	_____	_____	_____	_____

List any scholastic honors, awards

\_\_\_\_\_

Describe any other school or specialized training

\_\_\_\_\_

Major in college \_\_\_\_\_ Major instrument \_\_\_\_\_

Minor in college \_\_\_\_\_ Minor instrument \_\_\_\_\_



## Independent Contractor Application for Music Teachers - page 2

### Teaching History

Please provide information covering your teaching history. Cover your last three positions.

Organization/School \_\_\_\_\_ Dates \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Organization/School \_\_\_\_\_ Dates \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Organization/School \_\_\_\_\_ Dates \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If you worked in any of your previous positions under another name, please give that name below (for reference checking purposes)

### Teaching References

List people for whom you've worked (or taught) who have personal knowledge of your character, experience, and capability. If you have a limited teaching history, you may also list teachers, advisors, or college professors who know you. (We must be able to reach at least three references).

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Organization/School \_\_\_\_\_



## Independent Contractor Application for Music Teachers - page 3

### Teaching References (continued)

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Organization/School \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Organization/School \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

Organization/School \_\_\_\_\_

ACKNOWLEDGEMENT: I grant permission for the Company to investigate my references, and I authorize my references to provide any information to the Company that they deem appropriate.

Signature \_\_\_\_\_ Date \_\_\_\_\_