



New Instructor Application

Please complete the information below. Email to **arts@alpharetta.ga.us** or mail/drop off in person at the Alpharetta Arts Center, 238 Canton Street, Alpharetta, GA 30009. (678)297-6135

Instructor Name _____
Phone: _____ Email _____
Address: _____

Work Experience/Volunteer History

Present Employer _____ Position _____
Address _____
Contact Person _____ Phone# _____
Employed From: month _____ year _____ To: month _____ year _____

Past Employer _____ Position _____
Address _____
Contact Person _____ Phone# _____
Employed From: month _____ year _____ To: month _____ year _____
Reason for leaving _____

References

Name _____ Relationship _____
Address _____
Phone # _____ Email _____

Name _____ Relationship _____
Address _____
Phone # _____ Email _____

Name _____ Relationship _____
Address _____
Phone # _____ Email _____

Education

High School _____ Graduated yes/no

Colleges(s) _____ Graduated yes/no

Attended from _____ to _____ Graduated yes/no

Attended from _____ to _____ Graduated yes/no

Certificates/Training: _____

Other: _____

Are you over 18 years of age? Yes _____ No _____

Have you ever been convicted of a felony? Yes _____ No _____

If yes, please explain _____

New Instructors: All instructors teaching classes are required to have yearly background checks. Some instructors may be required to provide liability insurance. All instructors are Independent Contractors and not employees of the City of Alpharetta.

Bio: Please attach a bio and resume to this application along with digital images of personal work to arts@alpharetta.ga.us. If you are proposing a new class or workshop for the first time a separate class proposal application will need to be filled out.

Photo Consent: By Signing this, you agree that once application is approved, the Alpharetta Arts Center may use your photographs or photography of your artwork in the routine promotions of classes and activities for other-commercial applications.

I have read and agree to the above terms and conditions of this application and understand that this application does not guarantee an instructor contract.

Signature

Date

Administrative Use:

Interview In Person _____ Phone _____ Date _____

Notes:

Accepted: Yes _____ No _____