

WOODMONT ACADEMY OF FINE ARTS
INSTRUCTOR'S APPLICATION FORM

PERSONAL INFORMATION

Name _____ Date _____
Address: Street _____ City _____ Zip Code _____
Home Phone _____ Business Phone _____
Cell Phone _____ E-mail Address: _____
Date of Birth ___ / ___ / ___ Social Security # _____

CHRISTIAN BACKGROUND

How long have you known Christ as your Lord and Savior? _____
Where is your church membership? _____ Are you an active member? _____
In what capacity? _____

TEACHING PREFERENCE

What instrument or classes do you prefer to teach (in order of preference) and at what level?
(Beginning, Intermediate, Advanced)

Please circle the day(s) and list the hours which you would be available to teach. **All lessons will be taught at the East Campus of Woodmont Baptist Church.**

Days:	Monday	Tuesday	Wednesday	Thursday	Friday
Times:	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

How many of your current students will you be moving to Wafa? _____

Please fill out page two of this application and return to Woodmont Baptist Church,
Academy of Fine Arts, 2001 Darby Drive, Florence, AL 35630. (256) 766-1255 Fax
766-1264

PROFESSIONAL QUALIFICATIONS

EDUCATION

	Name & Location of School	Years Attended	Date Graduated	Degree or Certificate	Major/ Minor
College or University					
Graduate School					
Other Education					

List your professional organizations, certifications, credentials, etc. _____

TEACHING EXPERIENCE

Place	Instrument and/or Class	How Long?

REFERENCES

List below references who can testify as to your character and teaching ability. Please include a pastor and teacher if possible.

Name	Address	Phone

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