



“The mission of the Moonlight Arts Academy is dedicated to the cultivation and enrichment of the human spirit in all ages through the theatrical and performing arts.”

Academy Instructor Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

For which Academy session are you available to teach?

Session 1: Sept 7 - Oct 10

Session 2: Oct 19 - Nov 21

Both

Please indicate the hours you are available to teach in the space below:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10AM – 3PM						
4PM – 7PM						

Please indicate all subject areas and age groups you are experience and/or willing to teach:

	Kindergarten – 2 nd Grade	3 rd – 5 th Grade	6 th – 8 th Grade	9 th – 12 th Grade	College and Above
Drama					
Dance					
Music					

Please describe your teaching experience for the chosen subject areas and age groups:

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO If yes, explain: _____

Due to the COVID-19 pandemic, would you be willing to teach an in-person class under stringent CDC guidelines and procedures? YES NO

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Current/Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Is this a current or previous employer? _____

May we contact your current/previous employer for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Is this a current or previous employer? _____

May we contact your current/previous employer for a reference? YES NO

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

For questions or concerns please contact us at moonlightartsacademy@gmail.com