

# Eastern Illinois University Community Music Program Instructor Application

Name \_\_\_\_\_ Email \_\_\_\_\_

Phone Number \_\_\_\_\_

Instrument (i.e. piano, voice, guitar, clarinet, etc.) \_\_\_\_\_

Maximum number of students to teach per semester: \_\_\_\_\_

## INSTRUCTOR LEVEL

Staff Instructor (w/ degree) Music Degree \_\_\_\_\_ Year \_\_\_\_\_

University \_\_\_\_\_

Area of Study \_\_\_\_\_

Name of Applied Prof. \_\_\_\_\_

EIU Student Instructor Major \_\_\_\_\_ Year in School \_\_\_\_\_

Instrument \_\_\_\_\_

Applied Professor \_\_\_\_\_

**ADDITIONAL INFORMATION (Please include any information that you feel would assist in placing students with you, i.e. past teaching experiences, awards, etc.) You may attach a resume if you wish.**

**LESSON PLAN/OBSERVATION APPROVAL**

*I certify that I have met with my applied professor and/or the Director of the CMP to discuss various instruction options and methods of study for teaching within the program. I also give permission for my applied professor and/or the Director of the CMP to occasionally observe my lessons as part of the program and understand that said observations will be announced in advance.*

**Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Signature of Applied Professor or Program**

**Director** \_\_\_\_\_

**Ethics Policy**

As an instructor for the *EIU Community Music Program*, I agree that I will not give private instruction to a student who has studied with me (through the program) outside the *EIU Community Music Program*, for at least one year after I've ceased to teach for the program.

I have read and understand the ethics policy.

X

\_\_\_\_\_  
**Signature of Instructor**

Please return the completed application to Magie Smith, 2417 DFAC.