

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.