

Fair Haven Community Arts Center Teacher Application Form

Name: _____

Address: _____

Phone: _____ E-mail: _____

Type of Class: Visual arts (Painting, Drawing, etc) Ceramics Music
 Art Appreciation/History Crafts (Jewelry making, Decoupage, etc.)
 Drama Literary Arts Photography Other

Course Title & Description: _____

Student Age range: _____ Min/Max # students: _____

Class Duration: Hours/Session _____ # Sessions/Week _____ # Weeks _____

Preferred: Day: _____ Time: _____ Dates to be offered _____

Is class part of a series? Yes/No

If so, please list other classes in the series: _____

Suggested Student Fee: \$ _____ Proposed Instructor Fee class: \$ _____

Facility/space requirements: _____

Please provide a summary of your teaching experience:

