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Christian Arts & Music Program Instructor Application

Please print clearly

Name: _____ Date of Birth: ____/____/____
Last First M.I. Month Day Year

Address: _____
Street Address City State Zip Code

Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Email: _____@_____._____

Social Security Number: _____ - _____ - _____

Sex: ___ Male ___ Female Marital Status: _____ Driver Lic. #: _____

Education & Background & Experience

Please print clearly

High School: _____
Name Location Year graduated

College: _____
Name Location Dates Degree

Graduate School: _____
Name Location Dates Degree

Other Training: _____
Details

Experience: _____
Details

Area of expertise: _____
Details

Please give a brief explanation of how you think you best can help with the camp

_____/_____/_____
Signature Month Day Year

Return application to: Community Christian Choir, PO Box 9486 Trenton, NJ 08650