



Docent Application

Please complete this application for the 2011/2012 Season. If you have any questions or would like additional information, contact Renee Lundy at 773.761.2340 or docents@cso.org.

Personal Information

Miss Mr. Mrs. Ms. _____

Address _____ Apt _____

City _____ State _____ Zip _____

Day Phone (_____) _____ Evening Phone (_____) _____

Fax (_____) _____ E-Mail Address _____

Education

Degree(s) _____ Area(s) of study _____

List any music education, performance, or music history classes you've taken. _____

List any instruments you play. _____

Experience

For which arts organizations have you volunteered? (List activities and dates.) _____

Do you have any relevant professional experience? (List activities and dates.) _____

What experience have you had with children? _____

Do you have any special skills that might be helpful?

Foreign language Sign language Working with people with special needs

Other _____

How did you hear about the Docent Program? _____

Travel Options

During the training program, you will be required to observe active docents in the classroom. Where in the metropolitan area would you be willing to travel? (Check all that apply.)

City ___ North ___ NW ___ West ___ SW ___ South ___ Central

Suburbs ___ North ___ NW ___ West ___ SW ___ South

How will you be traveling to the schools? Car Public Transit