

# Choir of the Sound: Associate Director Application Form

## Applicant Information

Full Name:

*Last*

*First*

*M.I.*

Address:

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Phone:

Email

Date Available:

Social Security No.:

Are you a citizen of the United States?

YES

NO

If no, are you authorized to work in the U.S.?

YES

NO

Have you ever worked for Choir of the Sound?

YES

NO

If yes, when?

Have you ever been convicted of a felony?

YES

NO

If yes, explain:

## Education

High School:

Address:

From:

To:

Did you graduate?

YES

NO

Diploma:

College:

Address:

From:

To:

Did you graduate?

YES

NO

Degree:

Other:

Address:

From:

To:

Did you graduate?

YES

NO

Degree:

## References

*Please list three professional references.*

Full Name:

Relationship:

Company:

Phone:

Address:

Full Name:

Relationship:

Company:

Phone:

Address: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_