



APPLICATION FOR EMPLOYMENT

Clermont Academy of Dance

634 8th St. Clermont, Fl. 34711

Applications and Resumes must be sent to Barbara's Attention

Email: Barbara@clermontdance.com or fax to (352) 242-3755

Position Desired _____ **Today's Date** _____

Personal

First Name _____ Middle In. ____ Last Name _____

Address _____

City/State/Zip _____

Hm phone _____ Mobile ph _____

Education

High School _____ Graduation Date _____

College/University _____ Graduation Date _____

Degree _____

Employment Experience (please list past employers, a contact name and ph. # beginning with the most recent)

Employment _____

Contact name & phone # _____

Employment _____

Contact name & phone # _____

Employment _____

Contact name & phone # _____

Why do you desire employment with Clermont Academy of Dance?

As a member of our faculty and staff, how would you motivate and inspire students?

When are you available to work?

M__ T__ W__ Th__ F__ S__ (no classes on Sun) AM__ PM__

Our Academy's calendar is very similar to that of Lake County Public Schools. Do you have any conflicts with this? _____