**Teacher Referral Information Form – 2018-2019**

Name Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address (Including Coordinates) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instrument(s): Piano \_\_\_\_\_ Organ \_\_\_\_\_ Voice \_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Levels you qualify and prefer to teach (Check all that apply)

Beginning \_\_\_\_\_ Intermediate \_\_\_\_\_ Advanced \_\_\_\_\_ Adult Beginner \_\_\_\_\_

Are you willing to teach in a student’s home? Yes \_\_\_\_\_ No \_\_\_\_\_

Please check the following you currently, or plan to, participate in:

\_\_\_\_\_ AIM \_\_\_\_\_ Chapter Evaluations

\_\_\_\_\_ Competitions \_\_\_\_\_ SouthTowne Monster Concert

\_\_\_\_\_ UFMC Festivals \_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a Nationally Certified Teacher of Music (NCTM)? Yes \_\_\_\_\_ No \_\_\_\_\_

Briefly list your teaching credentials and experiences: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_

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Other relevant information: ­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher Referral Chairman: Norma Lambert 801 571-7949

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 Sandy, UT 84094