



# Docent Training Assistant Application

Phone: (510) 733-1189

Email: [info@musicforminors2.org](mailto:info@musicforminors2.org)

[www.musicforminors2.org](http://www.musicforminors2.org)

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_

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

**1. How did you learn about this position?**

- |  |  |
|--|--|
| A. <input type="checkbox"/> MFMII Staff, Board, Docent or Liaison (circle) | E. <input type="checkbox"/> School PTA, Site Council, or Staff |
| B. <input type="checkbox"/> MFMII Community Event                          | F. <input type="checkbox"/> School Newsletter                  |
| C. <input type="checkbox"/> School Concert / Presentation                  | G. <input type="checkbox"/> Newspaper (name)                   |
| D. <input type="checkbox"/> MFMII Website                                  | H. <input type="checkbox"/> Other (explain)                    |

**2. Why do you want to be the Music for Minors II Training Assistant?**

\_\_\_\_\_  
\_\_\_\_\_

**3. What experience do you have working with adults in a classroom setting?**

\_\_\_\_\_  
\_\_\_\_\_

**4. What musically related experience or background do you have?**

\_\_\_\_\_  
\_\_\_\_\_

**5. Please list former employers and type of employment along with dates you worked. Please do the same for volunteer experience. Include contact information. (Please attach a resume if you have one)**

\_\_\_\_\_  
\_\_\_\_\_

**6. You might be asked to assist with teaching rounds and partner songs.**

- |                            |                                     |                            |  |
|----------------------------|-------------------------------------|----------------------------|--|
| A <input type="checkbox"/> | <b>Have you sung with children?</b> | D <input type="checkbox"/> | <b>Do you read music?</b>                |
| B <input type="checkbox"/> | <b>Can you keep a beat?</b>         | E <input type="checkbox"/> | <b>Do you play a musical instrument?</b> |
| C <input type="checkbox"/> | <b>Can you sing on pitch?</b>       |                            | If yes, list the instruments:            |

\_\_\_\_\_

7. You may need to take attendance and submit weekly updates to the instructor as well as communicate with the docent trainees:

			Skill Level		
			Proficient	Average	Beginner
A.		Do you have experience using Google docs?			
B.		Do you have experience using Google sheets?			
C.		Do you have experience using email?			

8. **What experience do you have with filing, sorting, collating, and distribution of documents?**

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9. You will need to lift chairs and move tables to set up the classroom. **Do you have any physical limitations that might prevent you from completing this task?**

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10. You will need to use various pieces of **technology equipment** during the training sessions.

			Skill Level		
			Proficient	Average	Beginner
A.		Do you have experience using a video camera?			
B.		Do you have experience using a CD player?			
C.		Do you have experience using an Ipod player?			
D.		Do you have experience using a document camera?			
E.		Do you have experience using a projector?			

11. **What else can you tell us about your interests and concerns?**

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12. **Please provide one in-state reference** (not a relative or spouse) that we may contact regarding your work or volunteer experience.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**An interview will be scheduled when your application is received.**

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**Signature**

*When the application is complete, please email to [info@musicforminors2.org](mailto:info@musicforminors2.org) or send to Music for Minors II, PO Box 2661, Fremont, CA 94536*