



The Portsmouth Arts Guild, P.O. Box 463, Portsmouth, RI 02871

INSTRUCTOR APPLICATION

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|---------------------|
| Today's Date: |
| Course Title: |
| Instructor's Name: |
| Address: |
| City/State/Zip: |
| Preferred Phone # : |
| E-mail: |
| Website: |

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| Course Description (please include BEG/INT/ADV level or levels if applicable): |
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| Will there be a materials fee? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, how much \$ _____ p. p. |
| Materials you will provide: |
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| Materials students will need to purchase: |
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| Instructor Biography (can include education, experience, awards, memberships, shows, etc.): |
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The Guild Hall will be available for classes at the following times:

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| Mondays | 9 am to 6 pm |
| Tuesdays | 9 am to 4:30 pm |
| Wednesdays | 9 am to 10 pm |
| Thursdays | 9 am to 6 pm |
| Fridays | 9 am to 10 pm |
| Saturdays | 9 am to 10 pm |

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| Proposed Schedule: <input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat |
| Date (1 st choice): |
| Date (2 nd choice): |
| Date (3 rd choice): |
| Hours: from _____ <input type="checkbox"/> am <input type="checkbox"/> pm to _____ <input type="checkbox"/> am <input type="checkbox"/> pm |
| Meet for _____ weeks |
| MAX. Class Size: _____ MIN. Class Size: _____ |
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| Special Equipment Needed (if any): |
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| Tuition (25% of the tuition is retained by the PAG): \$ _____ |
| For example, if tuition is \$100, and there are 4 students, total tuition = \$400. \$300 would be payment to instructor, \$100 retained by PAG. |

Return to: PAG Workshops, P.O. Box 463, Portsmouth, RI 02871