

Michelle's Encore Dance Studio

Studio: 205 S. Washington | **Mailing Address: 401 S. Jefferson, Wellington KS 67152**
Home: 620- 326-6401 Cell: 785 466-6338 info@encoredancewellington.com

Teacher /Renter Application

Name: _____

E-mail: _____

Phone # (circle:) home or cell: _____

Other phone #(circle:) home or cell: _____

Address: _____

City: _____ State: _____ Zip: _____

Current Occupation: _____

Days/Times Available: (write the times available on the line next to the day)

Monday - Available time range: _____ - _____

Tuesday - Available time range: _____ - _____

Wednesday - Available time range: _____ - _____

Thursday - Available time range: _____ - _____

Friday - Available time range: _____ - _____

Saturday - Available time range: _____ - _____

Style you want to teach: (circle)

Music & Movement Baby Ballet Youth Combo Dance Classes
Ballet Jazz Tap Pom Pom Hip Hop Lyrical
Leaps/Turns Technique Contemporary Modern ZUMBA Pilates

Levels you want to teach: (circle)

Pre-School Intro Combo Beginner
Intermediate Advanced Performance/Competitive

Age you want to teach: (circle)

18-36 mos 2-3 3-4 4-5 5-6
6-8 8-10 10-12 Teen/Adult Adult

Related Dance/Fitness Experience

Dance Background

List studio background, school team, dance/fitness classes and dates attended. Choreography experience, teaching, competitions, awards.

Special Skills or Qualifications

Summarize any special skills and qualifications you have acquired from projects, employment, previous volunteer work, or through other activities, that you feel help qualify you as a dance teacher/fitness instructor.

Personal Interest

What have you recognized in yourself as specific qualities that would have you succeed as a dance teacher/fitness instructor?

Notes: