

TEACHER REGISTRATION FORM

Personal Information

Date _____

Last name					
First name					
Address					
			Apt		
City		State		Zip	
Home phone		Cell phone			
Work phone		Fax			
E-mail address				Gender	

Detailed Information

Are you a licensed California studio teacher? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Studio license #		Expiration date	
Would you be interested in wrangling?* <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you own a car? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Social Security #			
In which states and cities can you work as a local hire?			

Availability (check all that apply)

Teaching: <input type="checkbox"/> Full day <input type="checkbox"/> Hourly <input type="checkbox"/> All	Touring: <input type="checkbox"/> Long term <input type="checkbox"/> Short term <input type="checkbox"/> All
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Certifications

Area/subject of certification	State

* A "child wrangler" takes responsibility for supervising juvenile (under 16) actors during rehearsals and performances. A child wrangler is hired by the production company, not by On Location Education.

Subjects you can teach (not necessarily for which you are certified)

- | | | |
|---|---|--|
| <input type="checkbox"/> Middle School English | <input type="checkbox"/> Italian 4 | <input type="checkbox"/> Russian 3 |
| <input type="checkbox"/> Middle School Social Studies | <input type="checkbox"/> Italian 5 (fluent) | <input type="checkbox"/> Russian 4 |
| <input type="checkbox"/> Middle School Math | <input type="checkbox"/> Spanish 1 | <input type="checkbox"/> Russian 5 (fluent) |
| <input type="checkbox"/> Middle School Science | <input type="checkbox"/> Spanish 2 | <input type="checkbox"/> Portuguese 1 |
| <input type="checkbox"/> Algebra I | <input type="checkbox"/> Spanish 3 | <input type="checkbox"/> Portuguese 2 |
| <input type="checkbox"/> Algebra II | <input type="checkbox"/> Spanish 4 | <input type="checkbox"/> Portuguese 3 |
| <input type="checkbox"/> Geometry | <input type="checkbox"/> Spanish 5 (fluent) | <input type="checkbox"/> Portuguese 4 |
| <input type="checkbox"/> Trigonometry | <input type="checkbox"/> German 1 | <input type="checkbox"/> Portuguese 5 (fluent) |
| <input type="checkbox"/> Pre-Calculus | <input type="checkbox"/> German 2 | <input type="checkbox"/> Japanese 1 |
| <input type="checkbox"/> Calculus | <input type="checkbox"/> German 3 | <input type="checkbox"/> Japanese 2 |
| <input type="checkbox"/> Earth Science | <input type="checkbox"/> German 4 | <input type="checkbox"/> Japanese 3 |
| <input type="checkbox"/> Physical Science | <input type="checkbox"/> German 5 (fluent) | <input type="checkbox"/> Japanese 4 |
| <input type="checkbox"/> Biology | <input type="checkbox"/> Latin 1 | <input type="checkbox"/> Japanese 5 (fluent) |
| <input type="checkbox"/> Physics | <input type="checkbox"/> Latin 2 | <input type="checkbox"/> Ancient History |
| <input type="checkbox"/> Chemistry | <input type="checkbox"/> Latin 3 | <input type="checkbox"/> US History |
| <input type="checkbox"/> Psychology | <input type="checkbox"/> Latin 4 | <input type="checkbox"/> World History |
| <input type="checkbox"/> French 1 | <input type="checkbox"/> Latin 5 (fluent) | <input type="checkbox"/> Art History |
| <input type="checkbox"/> French 2 | <input type="checkbox"/> Greek 1 | <input type="checkbox"/> Music History |
| <input type="checkbox"/> French 3 | <input type="checkbox"/> Greek 2 | <input type="checkbox"/> British Literature |
| <input type="checkbox"/> French 4 | <input type="checkbox"/> Greek 3 | <input type="checkbox"/> American Literature |
| <input type="checkbox"/> French 5 (fluent) | <input type="checkbox"/> Greek 4 | <input type="checkbox"/> World Literature |
| <input type="checkbox"/> Italian 1 | <input type="checkbox"/> Greek 5 (fluent) | <input type="checkbox"/> Elementary K-6 |
| <input type="checkbox"/> Italian 2 | <input type="checkbox"/> Russian 1 | <input type="checkbox"/> Elementary K-8 |
| <input type="checkbox"/> Italian 3 | <input type="checkbox"/> Russian 2 | <input type="checkbox"/> Early Childhood N-3 |

Other: _____

<p>Has your license ever been suspended or revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please explain _____ _____</p> <p>Have you ever been convicted by federal, state, or other law enforcement authorities for violation of any federal, state, county or municipal law, regulation, or ordinance? (Do not include any minor traffic violations) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, please explain _____ _____</p>

Professional References

Name		Name	
Title		Title	
Phone		Phone	
Address		Address	

Please fax completed form to (914) 747-2750