

* Please attach a cover letter and 1-2 page resume



AWE Truck Studio Team Application

PERSONAL INFORMATION:

Name (Last Name First): _____

Present Address: _____
Street, Apt. No. City State Zip

Permanent Address: _____
(if different) Street, Apt. No. City State Zip

Home Phone: _____ Cell Phone: _____ Work: _____

Fax: _____ Email: _____

How did you hear about AWE? (Circle all that apply)

- | | | | |
|---------------------------|----------|----------------|-------------------------|
| Employment Agency | Facebook | Friend | State Employment Office |
| College Placement Service | Email | school posting | MARN |
| Other: _____ | | | |

Ever worked with AWE before? _____ Where & When? _____

Do you speak more than one language? If yes, please list: _____

POSITION YOU ARE INTERESTED IN: Circle only ONE

Lead Teacher Truck Studio Intern

If you are applying for the Lead Teacher position and are not chosen, would you accept a position as a Truck Studio Intern? Circle ONE

Yes No

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DISCIPLINE: Circle any that you have significant experience in working with and/or teaching.

Visual Arts:

Ceramics/Sculpture

Video/New Media

Photography

Mixed Media

Painting/Drawing

Fiber Arts

Puppetry

Web/Graphic Design

Other: _____

Multi-Disciplinary:

Folk or Traditional Arts
(Traditional arts or crafts
handed down within your
community or culture)

(Please specify): _____

EDUCATION: Highest Level Attained Only.

School Name: _____

School Address: _____

No. of Years Attended: _____ Date of graduation: _____

Degree/Certificate Received: _____

REFERENCES: Below, please give the names of three persons familiar with your work to whom you are not related , and whom you have known for at least one year.

1) Name: _____ Phone: _____
Address: _____
Business: _____
Years Acquainted: _____

2) Name: _____ Phone: _____
Address: _____
Business: _____
Years Acquainted: _____

3) Name: _____ Phone: _____
Address: _____
Business: _____
Years Acquainted: _____

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BIOGRAPHY: Please submit a brief biography (no more than 100 words) that may be published in grant reports and in other AWE materials.

TEACHING ARTIST/TEACHER OF ART APPROACH:

Please answer each question, use additional pages as necessary.

Please describe your personal mission and philosophy as a Teaching Artist or Teacher of Art and your approach to working with children.

Truck Studio teams often come across the unexpected. What is your method for thinking and working through unexpected challenges or chaotic situations?

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BACKGROUND CHECK:

AWE conducts a criminal background check for all employees, independent contractors and volunteers. The purpose of the check is to ensure there is nothing that would render them unfit to work with children. Background checks shall be completed in the state(s) in which the individual resided for at least 6 months in the last 5 years and was 18 years old or older at the time.

The criminal background check is done through the Wisconsin Criminal Investigation Bureau, and statewide public records are searched for criminal convictions. Results of the check will be disclosed to any individual before being submitted to any outside individual or agency.

AWE follows federal and state law and does not discriminate based on the results of the check unless there is a clear relationship between the criminal offense discovered and the nature of the volunteer or paid work to be performed.

Today's Date: _____ Date of Birth: ___ Month ___ Day ___ Year

First Name: _____ M.I. ___ Last Name _____

Street: _____ City _____ Zip _____

Please list any other names or variations of names you have used _____

If you lived in any other state for at least 6 months during the past 5 years and were age 18 or older, please list past address(es)

Street _____

City _____ State _____ ZIP _____

Have you ever been convicted of any crime, including sex-related or child abuse related. offenses?

_____ If so, please list the offense(s), including the date of conviction, state, and sentence.

AUTHORIZATION:

"I certify that the facts contained in this form are true and complete to the best of my knowledge and understand that falsified statements on this application shall be grounds for cancellation of any contract with AWE.

I authorize investigation of all statements contained herein and the references listed above to give you any and all pertinent information they may have, personal or otherwise and release AWE from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the organization has any authority to enter into any agreement for services for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized organization representative."

Date _____ Signature _____

THIS SECTION TO BE COMPLETED BY AWE:

Background Check Results: _____

Completed By: _____ Date _____

Print name:

Signature

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E-mail: mary@awe-inc.org