

**ALL PRIVATE LESSON TEACHERS MUST COMPLETE THE APPLICATION PROCESS FOR EACH SCHOOL YEAR**

Date Submitted: \_\_\_\_ / \_\_\_\_ / \_\_\_\_



FRISCO INDEPENDENT SCHOOL DISTRICT

**Fine Arts Private Lesson Teacher Application 2024-2025**

Name: \_\_\_\_\_ Telephone: (     ) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Instrument(s) you plan to teach: \_\_\_\_\_ Voice: \_\_\_\_\_

Department (check one):    \_\_\_\_ Band            \_\_\_\_ Orchestra            \_\_\_\_ Choir

Available to teach:    Monday \_\_\_\_ Tuesday \_\_\_\_ Wednesday \_\_\_\_ Thursday \_\_\_\_ Friday \_\_\_\_

Level:            High School: \_\_\_\_\_            Middle School: \_\_\_\_\_

Have you taught in FISD previously? \_\_\_\_\_ Dates: \_\_\_\_\_

List the FISD campus (s) and director’s name(s) you have contacted and/or been requested by to teach: \_\_\_\_\_

Professional and / or personal references (List three)

	Full Name	Position	Address/Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

Who recommended you for this position? \_\_\_\_\_

**Applicants Signature: (Can be typed)** \_\_\_\_\_

**Other Required Documents:**

\_\_\_\_\_ Proof of Music Association Insurance (TMEA, NFHS, Etc.)            \_\_\_\_\_ Copy of Driver’s License

**Scan and return all required documents to:**

**Lynn Ancker** [anckerl@friscoisd.org](mailto:anckerl@friscoisd.org) and **LaLinda Page** [pagel@friscoisd.org](mailto:pagel@friscoisd.org)

Phone: **469.633.6180/469-633-6183**