



**Job Application
Collaborative Pianist
Mason Community Arts Academy**

Thank you for applying for the position of Collaborative Pianist. Please complete the following application and return it to Mason Community Arts Academy along with your resume and 2 letters of reference. If necessary you may attach additional pages to this application.

Name _____ Date of Application _____
Address _____ City, State, Zip _____
Phone _____ Email _____

EDUCATION

Undergraduate School _____
Attended from _____ to _____ Degree _____
Concentration _____ Date (or expected date) of Graduation _____

Graduate School _____
Attended from _____ to _____ Degree _____
Concentration _____ Date (or expected date) of Graduation _____

Graduate School _____
Attended from _____ to _____ Degree _____
Concentration _____ Date (or expected date) of Graduation _____

PRIMARY INSTRUMENT INFORMATION

Primary Instrument _____ Years of Study _____
Number of years teaching private lessons _____ and group classes _____

Your last three primary teachers

Name _____	Position _____
Name _____	Position _____
Name _____	Position _____

Please list any significant honors or awards you have received as well as any notable performances you have given as a soloist or collaborative pianist.

Briefly describe your previous accompanying experience. Please specify what instruments you have experience with, as well as the ages and levels of students you have performed with.

Are you currently employed as a performer in any professional groups? List below.

List any training you have completed - include college courses as well as professional workshops/seminars.

How did you hear about Mason Community Arts Academy and why do you want to be a part of our organization?

REFERENCES

Please list TWO professional references who are very familiar with your playing.

Name _____ Title _____

Relationship _____ Institution _____

Phone _____ Email _____

Address _____

Name _____ Title _____

Relationship _____ Institution _____

Phone _____ Email _____

Address _____

Name _____ Title _____

Relationship _____ Institution _____

Phone _____ Email _____

Address _____

Feel free to attach any other materials you think would be helpful to this application.

Office Use Only

☐ Completed Application

☐ Resume Attached

☐ Reference List

☐ Recommendations

Return this form to:

Mason Community Arts Academy
4260 Chain Bridge Rd
Fairfax, VA 22030