



Greater Cleveland Chorus is a chapter of
Sweet Adelines International



Prospective Director Application

To apply, please provide a cover letter and complete this application. You are welcome to include your resume and/or CV with your completed application.

Please send your application package to one of these addresses:

Preferably via e-mail to:

directorsearchgcc@gmail.com

or Snail Mail:

Greater Cleveland Chorus

c/o Judy Roman

38108 Essex Place

North Ridgeville, OH 44039

Attn: Director Search Committee

A: Contact Information

1: Name: _____

2: Address: _____

3: City/State/Zip: _____

Contact info (please mark preferred contact method):

4: E-mail: _____

5: Phone (home): _____ 6: Phone (work): _____

7: Phone (cell): _____ Are text messages ok? Yes No

8: Other(s): _____

B: Background / Training in Music

1: Formal Music Education

Did you study music in college: Yes No What music degree(s)? _____

Indicate area(s) of concentration:

Instrumental

Composition

Music Theory

Directing Technique

Vocal Technique

Other _____

Applicant Name: _____

2: Indicate areas of participation during high school / college / community / professional:

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Choral Choir | <input type="checkbox"/> Band |
| <input type="checkbox"/> Show Choir | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Instrumental Groups | <input type="checkbox"/> Other _____ |

3: Indicate types of directing experience:

- | | | |
|--|----------------------|---------------------|
| <input type="checkbox"/> School & College Vocal Groups | Grade level(s) _____ | Group size(s) _____ |
| <input type="checkbox"/> Music Theater | Age(s) _____ | Group size(s) _____ |
| <input type="checkbox"/> Church | Age(s) _____ | Group size(s) _____ |
| <input type="checkbox"/> Community _____ | Age(s) _____ | Group size(s) _____ |
| <input type="checkbox"/> Professional _____ | Age(s) _____ | Group size(s) _____ |
| <input type="checkbox"/> Other _____ | Age(s) _____ | Group size(s) _____ |
| <input type="checkbox"/> Other _____ | Age(s) _____ | Group size(s) _____ |

C: Background / Training in Barbershop

1: Indicate present or past membership/participation/experience in the art form with:

- a: *Sweet Adelines International* _____

- b: *Regional Competition* _____

- c: *International Competition* _____

- d: *Barbershop Harmony Society* _____

- e: *Harmony, Incorporated* _____

- f: *Other Barbershop/A Cappella Experience* _____

2: Indicate area(s) of participation in the art form:

- | | |
|---|---|
| <input type="checkbox"/> Chorus Member | <input type="checkbox"/> Frontline Director |
| <input type="checkbox"/> Section Leader | <input type="checkbox"/> Associate Director |
| <input type="checkbox"/> Board and/or Music Team Member | <input type="checkbox"/> Assistant Director |
| <input type="checkbox"/> Choreographer | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Quartet Member | <input type="checkbox"/> Other _____ |

3: Indicate other type(s) of experience in the art form:

- | | |
|------------------------------------|--------------------------------------|
| <input type="checkbox"/> Coaching | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Arranging | _____ |

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4: Indicate training in the art form:

a: *Sweet Adelines International* (include attendance at regional and international education events):

b: *Other*: _____

5: Indicate your participation or status in the Sweet Adelines International Director Certification Program (DCP): _____

6: Describe any experience as a Frontline Director: _____

D: Professional Goals/Interests

1: Indicate present interest in membership/participation in the art form with:

a: *Sweet Adelines International* _____

b: *Regional Competition* _____

c: *International Competition* _____

d: *Barbershop Harmony Society* _____

e: *Harmony, Incorporated* _____

f: *Other Barbershop/A Cappella Experience* _____

2: Indicate area(s) of interest in the art form:

Chorus Member

Section Leader

Music Team Member

Choreographer

Quartet Member

Frontline Director

Other _____

Other _____

3: Indicate other type(s) of interest in the art form:

Coaching

Teaching

Arranging

Other _____

Other _____

Applicant Name: _____

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4: Indicate training interest in the art form:

a: *Sweet Adelines International (include attendance at regional and international education events):*

b: *Other* _____

E. Your availability:

1: Occupation _____

2: Employer _____

3: Does your schedule permit you to attend chorus rehearsals on Tuesday evenings? Yes No

4: Do you work evenings? Yes No

5: Do you work weekends? Yes No

6: Indicate when you would be available to direct chorus rehearsals, performances, and attend educational events:

Weekdays

Other _____

Weekends

Evenings

Exceptions _____

7: If selected, when would you be available to assume the role of chorus director? _____

8: Do you currently direct a chorus? _____ If so, do you plan to continue? _____

F: Other information you would like us to know:

If you have questions or would like further information, please go to our website: <http://gcchorus.com> or you may contact the director search committee directly at directorsearchgcc@gmail.com.

Applicant Name: _____