

## INSTRUCTOR RESUME

Name: \_\_\_\_\_  
Address: \_\_\_\_\_

phone/fax/email: \_\_\_\_\_

### Education/Training:

(Dates) From: \_\_\_\_\_ Description: \_\_\_\_\_  
To: \_\_\_\_\_

(Dates) From: \_\_\_\_\_ Description: \_\_\_\_\_  
To: \_\_\_\_\_

### Teaching Experience:

(Dates) From: \_\_\_\_\_ Description: \_\_\_\_\_  
To: \_\_\_\_\_

City, State, Country: \_\_\_\_\_

(Dates) From: \_\_\_\_\_ Description: \_\_\_\_\_  
To: \_\_\_\_\_

City, State, Country: \_\_\_\_\_

(Dates) From: \_\_\_\_\_ Description: \_\_\_\_\_  
To: \_\_\_\_\_

City, State, Country: \_\_\_\_\_

### Performance media:

(List instruments played fluently) \_\_\_\_\_

### Awards or Honors Received:

Date: \_\_\_\_\_  
Name/description of award or honor (including grants)

Name of organization that gave it

Date: \_\_\_\_\_  
Name/description of award or honor (including grants)

Name of organization that gave it

**Lecture/Demonstrations or Workshops:**

Date: \_\_\_\_\_

\_\_\_\_\_  
Title or short description of presentation\_\_\_\_\_  
Name of program and sponsoring institution

City, State: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Title or short description of presentation\_\_\_\_\_  
Name of program and sponsoring institution

City, State: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Title or short description of presentation\_\_\_\_\_  
Name of program and sponsoring institution

City, State: \_\_\_\_\_

**Major Performances:**

Date: \_\_\_\_\_

\_\_\_\_\_  
Show title, Name of performance group\_\_\_\_\_  
Name of sponsoring institution

City, State \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Show title, Name of performance group\_\_\_\_\_  
Name of sponsoring institution

City, State \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Show title, Name of performance group\_\_\_\_\_  
Name of sponsoring institution

City, State \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Show title, Name of performance group\_\_\_\_\_  
Name of sponsoring institution

City, State \_\_\_\_\_

**References:**

Name: \_\_\_\_\_  
Job title: \_\_\_\_\_  
Institution: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Name: \_\_\_\_\_  
Job title: \_\_\_\_\_  
Institution: \_\_\_\_\_  
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\_\_\_\_\_