



Albany Museum of Art Summer Art Camps 2021 Teacher Application

Applicant Information

Name: _____
Last First MI

Occupation/ School name and grade _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____
Day Evening Cell

E-mail Address: _____

Please indicate the Camp Session(s) you are applying for: (please see attached information for details about camp sessions)

References:

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

3. Name: _____ Phone: _____

Please attach a Current Resume/Vita outlining your Teaching and/or Art Related Work Experience. Applications must have attached Resume/Vitas to be considered.