REGIONAL RESOURCE TEAM

**Regional Education Faculty**

**Application Form 2020**

**VERSION DATE:** June 2020

**Please complete this form electronically and return to education@sweetadelines.co.nz by Friday 10 July 2020.**

Refer to the Regional Faculty position description on the SANZ website before completing your application.

**PERSONAL DETAILS**

|  |  |
| --- | --- |
| Name: |  |
| Email: |  |
| Phone: |  |
| Chorus or CAL: |  |

**TEACHING AND EDUCATION**

|  |
| --- |
| 1. What teaching or education skills would you bring to the region? (List the coaching/training specialties that you can provide.)
 |
|  |
| 1. List the regional and chorus positions held and the relevant dates.
 |
|  |
| 1. List the education events that you have attended in the past five years and describe how you have incorporated these experiences in your coaching/training.
 |
|  |
| 1. What coaching/training have you provided to individuals or groups outside Sweet Adelines?
 |
|  |
| 1. If accepted as a member of the Regional Education Faculty, what support would you need from the Regional Education Director and her team?
 |
|  |

**VISION AND LEADERSHIP**

|  |
| --- |
| 1. What is your vision for Sweet Adelines in New Zealand over the next three to five years?
 |
|  |
| 1. How would you contribute to this vision as a regional faculty member?
 |
|  |

**REFEREES**

Please provide the contact details for two recent coaching clients who are willing to be contacted regarding your application:

|  |  |
| --- | --- |
| Name: |  |
| Contact: |  |
| Coaching provided: |  |
| Name: |  |
| Contact: |  |
| Coaching provided: |  |

**APPLICATIONS**

**Email your completed application to**: education@sweetadelines.co.nz

**Closing date for applications:** Friday 10 July 2020