

CORCORAN DOCENT APPLICATION

GENERAL INFORMATION	Name				
Please print or type.	Date of application (mm/dd/yy)				
	Street address				
	City	State ZIP			
	Phone (h)	Phone (w)			
	Phone (c)	Email			
	Emergency Contact	Contact phone			
	How did you find out about the Corcoran docent program?				
	Why do you want to be a docent?				
EXPERIENCE	List art courses and other courses or training which might relate to work as a docent or as a contact with the public, e.g. teaching, public speaking, American history, American literature.				
WORK EXPERIENCE	Professional and volunteer. Resumé may be substituted. Include employment and volunteer work in which you are currently involved. Please indicate number of hours of commitment.				

DOCENT EXPERIENCE	Have you ever I	been a docent?	○ Yes	○ No	
	Can you make a three-year commitment to the Corcoran docent program?				
	○ Yes	○ No			
	Have you ever worked with the following groups?				
	○ Children				
	○ Teens				
	○ Older adults				
	○ Special needs				
	Other				
DEFENELCES	Maria				
REFERENCES	Name				
	Relationship		Phone		
	Name				
	Relationship		Phone		
	Name				
	Relationship		Phone		
	Please return along with a letter of interest to:				

The Corcoran Gallery of Art

Education Department: Docent Program

500 17th Street, NW Washington, DC 20006