



TIDEWATER BASKETRY GUILD

TEACHER APPLICATION

Name _____

Address _____

City _____ State _____ ZIP _____

Phone: Cell _____ Email: _____

Home _____

Applicant's Status: _____ TBG member, volunteer teaching

(Check one) _____ TBG member, teaching for payment

_____ Visiting teacher

Check one: _____ My original pattern _____ Permission to teach this basket

BASKET NAME: _____

CLASS FEE: _____

DESCRIPTION: _____

SPECIAL TOOLS/REQUIREMENTS: _____

FINISHED SIZE: _____

COMPLETION TIME: _____ hrs.

NUMBER OF STUDENTS: _____ maximum

_____ minimum

SKILL LEVEL: (check one)

_____ Beginner

_____ Beginner/Intermediate

_____ Intermediate

_____ Intermediate/Advanced



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TEACHER APPLICATION

* * INSTRUCTIONS * *

Thank you for considering to teach a basket class to our members.

1. **Deadline:** Teacher applications are due one month prior to the calendar meeting.

NOTE: Teacher applications are accepted anytime throughout the year, but may not be reviewed until the calendar meetings.

2. Complete information requested on application.

3. The skill level explanations are as follows:

Beginner	No weaving experience to little experience with material being used
Beginner/Intermediate	Still beginner, but ready for something more challenging
Intermediate	Skilled at basic techniques with material being used
Intermediate/Advanced	Still intermediate weaver, but ready to try something more challenging

4. Include a photo of the basket.

NOTE: A sample basket may be requested prior to the calendar meeting.

5. Submit the completed application and photo of basket to **Tina Plageman**, TBG President, via one of the following:

- Email at witchie24@mchsi.com
- Mail to Tina Plageman, 113 East White Pine Drive, Moyock, VA 27958
- Deliver in person at meeting