



**Docent Application**  
(please print or type)

Information on this application is confidential and will be used only as it pertains to the Santa Cruz Mountains Art Center and its agents.

Name \_\_\_\_\_ Date \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Hours/Days you are available to work each month (Wed-Sun, 12:00-6:00 PM, or other):

\_\_\_\_\_

Gallery or related experience:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Two-Three References (do not include relatives):

1. Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

3. Name \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Have you ever been convicted of a crime or served jail time?  NO  YES

If YES, please explain: \_\_\_\_\_

I, the above applicant, swear under the penalty of law that the above information is correct.

\_\_\_\_\_

signature

date