



WARREN SYMPHONY ORCHESTRA

***MUSIC DIRECTOR/CONDUCTOR APPLICATION***

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Your name as you are known professionally

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City and State (Province) of your residence

**Your experience as an Orchestral Music Director/Conductor (most recent first)**

Organization	Year(s)	City	State (Province)
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**Other Professional Music Experiences (most recent first)**

Title	Year(s)	City	State (Province)
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**Education (most recent first)**

Institution	Degree	Year(s)	City	State (Province)
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**Significant Mentors, Instructors, Etc.**

Name	Date(s)	Location
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I authorize the Warren Symphony Orchestra and its Music Director Selection Committee to investigate all statements contained in this Application and accompanying resume, including records of any former employers and other references or sources concerning me. I authorize all such references and sources (and the Committee) to release this information without liability for damage incurred in giving it. I waive any written notice of the release of such records that may be required by state or federal laws.

I affirm that the information provided in this Application, accompanying resume and notes, if any, is true and complete. I also agree that any false information, misrepresentation, or omissions – oral or written – may disqualify me from further consideration for employment and may result in discipline or dismissal if discovered at a later date.

I authorize the Warren Symphony Orchestra Music Director Selection Committee to investigate any information submitted with my Application for the position of Music Director.

*I give permission for the Warren Symphony Orchestra Music Director Selection Committee to contact my current employer(s):*     *yes* \_\_\_\_ *no* \_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please send this Application and all accompanying information to:*

WARREN SYMPHONY ORCHESTRA  
MUSIC DIRECTOR SELECTION COMMITTEE  
4504 East Nine Mile Road  
Warren, Michigan 48091  
Fax 586-754-5507  
[wso@warrensymphony.org](mailto:wso@warrensymphony.org)