

## Director Certification Program Application

Chapter Name Metro Nashville Chorus Chapter # \_\_\_\_\_ Region 23  
Name Denice French Membership # \_\_\_\_\_  
Address 1001 Collins West Rd Home Phone 615-975-5601  
Lewisburg Alternate Phone \_\_\_\_\_  
TN Zip 37091 Fax \_\_\_\_\_ Email redsgal@Volstate.net

### Current Sweet Adelines International Title/Position

- ☐ Director/Co-director Chapter Name \_\_\_\_\_  
☐ Associate/Assistant Director Chapter Name \_\_\_\_\_  
☒ Candidate Chapter Name Metro Nashville Chorus

### Sweet Adelines International Membership Data

Year joined Sweet Adelines International: 2004 Has your affiliation been continuous? yes

Please list former chapter(s) and region(s): \_\_\_\_\_

### Sweet Adelines International Experience

- |   |  |
|---|--|
| <input type="checkbox"/> Chorus Director/Co-director  | <input type="checkbox"/> International Faculty     |
| <input type="checkbox"/> Associate/Assistant Director | <input type="checkbox"/> Judge (_____ Category)    |
| <input checked="" type="checkbox"/> Section Leader    | <input checked="" type="checkbox"/> Quartet Member |
| <input type="checkbox"/> Regional Leader              | <input type="checkbox"/> Quartet Coach             |
| <input type="checkbox"/> Arranger                     | <input type="checkbox"/> Chorus Coach              |
| <input type="checkbox"/> Other _____                  |  |

**PAID**

SEP 14 2012

CK# VISA \$100.00

### Musical Background

Formal education:

NONE

Other musical training:

played flute & Violin throughout school years

Barbershop experience outside Sweet Adelines International:

School choir, Church choir, Children's choir church director

Please list membership in other musical organizations (e.g., NAfME, ACDA, NATS): N/A

## Sweet Adelines International Educational Background

How many regional/international competitions have you attended in the past five years as a: 7 or 8

☐ Competing chorus director ☒ Competing chorus member ☐ Spectator

Please list any international directors' seminars/regional training programs you have attended in the past 2 years:

\_\_\_\_\_

Please list regional/international educational event(s) you have attended in the last 12 months:

Region 23 Fall Thing / Summer SingStation / Quanted Workshop

## Personal Goals

What do you hope to gain from enrollment in this program?

Being in the musical leadership as well as being a  
quanted member - I think all the things I can learn  
to improve my barbership skills will not only be  
useful but very helpful to my Chorus and section!

Signature \_\_\_\_\_

French

Date \_\_\_\_\_

9/2/12

Please complete and return this application to international headquarters, along with the **\$100 application fee** by check, money order (U.S. funds) payable to Sweet Adelines International or credit card. (This fee is non-refundable and non-transferrable.)

**PLEASE NOTE:** The application fee to enroll in the Director Certification Program **does not** include the DCP modules.

Please complete the following if using a credit card:

☒ VISA ☐ MasterCard ☐ Discover Card

Signature \_\_\_\_\_

French

Card # 407714201309371

Expiration Date 7/20

Sweet Adelines International • P.O. Box 470168 • Tulsa, Oklahoma 74147-0168  
918-622-1444 • 800-992-7464 • Fax 918-665-0894 • Internet: [sweetadelinesintl.org](http://sweetadelinesintl.org)

### For office use only

Date processed: \_\_\_\_\_

☐ Director/Co-Director

☐ Associate/Assistant Director

☐ Candidate