

APPLICATION FORM
for **AFFILIATION** as a **KODÁLY do-re-mi TEACHER**

(please tick) I wish to apply for affiliation as a **Kodály do-re-mi** Teacher.

Name: _____

Previous names (if applicable): _____

Address: _____

_____ Postcode: _____

Telephone: (Home) _____ (Work) _____

E-mail address: _____ (Fax) _____

Formal qualifications: _____

I have completed the necessary Application Form answering the six (6) criteria, and have attached relevant documentation.

If accepted as a Kodály **do-re-mi** teacher, I agree to:

- 1) uphold the philosophy of the K.M.E.I.A. Inc., and
- 2) teach within the guidelines set out in the Kodály **do-re-mi** Curriculum

I agree to forward the Teacher affiliation fee of \$225.00 to K.M.E.I.A. Inc. via the State Membership and Affiliations Coordinator, upon receiving notice of my successful application.

Signed: _____ Date: _____

Please send payment to:

David O'Keeffe
Membership and Affiliations Coordinator
do-re-mi (QLD)
14 Xanadu Crescent
Rothwell Q4022

AFFILIATION CRITERIA FOR *do-re-mi* TEACHERS

In order to satisfy a K.M.E.I.A. Inc. panel of your competence to teach according to the philosophy of Kodály, please tick the appropriate circles and provide details (where appropriate) for each criterion. Copies of requisite qualifications **verified by a J.P.**, together with details of experience and/or any other relevant documentation, need to be attached with your application.

Criterion 1

(please tick) I am a financial member of K.M.E.I.A. Inc.

Criterion 2

(please tick) I have met the minimum study/qualification requirements by completing: **Level 1** of the **Australian Kodály Award** in Preschool Music Education.

completed at: _____ in: _____ (year)

AND/OR

(please tick) I have successfully completed **Level 2** of the **Australian Kodály Award** in Preschool Music Education.

completed at: _____ in: _____ (year)

OR

(please tick) I have successfully completed **Level 3** and have been awarded the **Australian Kodály Certificate** in Early Childhood Music Education.

completed at: _____ in: _____ (year)

OR

List any equivalent **Kodály-based** studies which would be considered upon application to the panel (please list details):

Submit details of **any experience** in Early Childhood Music teaching which you consider may assist in your application.

Criterion 3

(please tick) To maintain my affiliation I will attend at least one professional development seminar or workshop approved by K.M.E.I.A. Inc. every two (2) years.

Criterion 4

(please tick) I hereby provide photocopied evidence of my Queensland Government Suitability Card for *Child Related Employment*.

For further information in obtaining a card, please phone Freecall 1800 113 611 or visit the Commission's website at www.childcomm.qld.gov.au . Suitability requirements may vary from State to State – please contact your do-re-mi State Coordinator for details.

Criterion 5

(please tick) I agree to pay the cost of \$225 (tax deductible) each year for my affiliation by 30th November in the year prior to my registration.

Criterion 6

(please tick) I agree that affiliated teachers, who choose to **employ** early childhood music teachers to conduct **do-re-mi** classes, ensure that these employees are individually affiliated **do-re-mi** teachers. An unregistered teacher is not permitted to use the **do-re-mi** curriculum.

Please list the contact details of **two referees** who can assure your professional suitability as a prospective **do-re-mi** teacher. These referees should be able to discuss your *Kodály experience* and your *teaching and interpersonal skills*.

1. Referee's name: _____

Occupation: _____

Contact numbers: (daytime) _____ (evening) _____

2. Referee's name: _____

Occupation: _____

Contact numbers: (daytime) _____ (evening) _____

Please note that fees and duration of lessons are set at the teacher's discretion.

- The **recommended minimum** fee for children in the classes is \$10.00 per child
- The **recommended** lesson time is between 30 – 45 minutes.

You may apply for provisional do-re-mi affiliation when you have completed the Level 1 early Childhood Course and can show that you are intending to complete Level 2 as soon as it is offered.

Upon approval of your do-re-mi application, you will be granted provisional do-re-mi affiliation. In order to convert your affiliation to full registration, you will need to have a current do-re-mi teacher (who you feel comfortable with) sit in on your lessons and complete the given survey form. Please ask the do-re-mi coordinator if you have any queries about this conversion. This process must happen towards the end of your 12 months of provisional registration.

The Committee regards these requirements as necessary to maintain the high standard of teaching essential for our young children. Thank you for your time taken to complete this application form.

Please return your completed document to:

David O'Keeffe
Membership and Affiliations Coordinator
do-re-mi (QLD)
14 Xanadu Crescent
Rothwell Q4022

