

# Greater Vallejo Recreation District

## Course Proposal for Instructors



Please complete the entire form:

Instructor's Name: \_\_\_\_\_

Business/Organization: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City Zip

Telephone Number: \_\_\_\_\_  
Day Evening

Email: \_\_\_\_\_

To whom should checks be made payable? Instructor \_\_\_\_\_ Business \_\_\_\_\_

Session (circle) Spring (Jan. thru April) Summer (May thru Aug.) Fall/Winter (Sept. thru Dec.)

Course Title: \_\_\_\_\_

Detailed Course Description. For additional space, please continue on the back or a separate piece of paper.

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Goal of the Class

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Objectives of the Class (what participants will get out of the program)

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Class description for use in the GVRD Activity Guide:

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Class Age: \_\_\_\_\_ Day(s) \_\_\_\_\_ Time(s) \_\_\_\_\_

or

Class Grade Level: \_\_\_\_\_

Session Dates: \_\_\_\_\_ No. of Classes \_\_\_\_\_

Alternate Dates: \_\_\_\_\_ No. of Classes \_\_\_\_\_

Class Fee: \_\_\_\_\_

Discount Fee (if applicable) \_\_\_\_\_

Non-Resident Fee (20% higher) \_\_\_\_\_

Class Size: Minimum \_\_\_\_\_ Maximum \_\_\_\_\_

Room Size: \_\_\_\_\_

Will you be providing the classroom facility? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, specify:

Building Name: \_\_\_\_\_

Address: \_\_\_\_\_

Facility Location and Requirements: (Please be specific to meet class needs. This will assist staff in placing your request in the proper location.)

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Supplies or materials required for the class:

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Any experience or prerequisites required of the student prior to taking the class:

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Please submit copy of course handbooks, literature or forms that will be used during the class.

Previous Instructor Experience – Please list the three most recent references. Attach your resume if it pertains to your class.

<u>Dates</u>	<u>Contact Person</u>	<u>Telephone No.</u>	<u>Agency</u>	<u>Reason for Leaving</u>
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Return completed Course Proposal to: Greater Vallejo Recreation District, 395 Amador Street, Vallejo, CA 94590.