



900 East Fairhaven Avenue ❖ Burlington, WA 98233
Phone (360) 755-9649 ❖ Fax (360) 755-1017 ❖ Recreation@burlingtonwa.gov

NEW INSTRUCTOR INFORMATION FORM

Thank you for your interest in presenting a class through Burlington Parks and Recreation Department. In order to help you put your proposal into a format that we can more easily work with, we ask that you fill out the following questionnaire. If you have copies of your artwork (if proposing a craft class or copies of a handout you may have put together, please attach it).

Other factors which will be considered are:

- Is this class currently being offered in this community? If so, is the demand for this class more than is available or would the addition of another class be in competition with other programs, or is the demand higher than what is being currently provided?
- Is this class consistent with the mission of the Burlington Parks and Recreation Dept?
- Would this class be more appropriately offered by another agency or by a private business?
- Is the targeted audience being adequately served by our agency?
- Does the class seem well thought out and realistic in both goals and scope?

Once you have completed the questionnaire, you may drop it by our office or mail it back to:

Burlington Parks & Recreation Department
Attn: Christi Kinney
900 East Fairhaven Avenue
Burlington, WA 98233

or email: christik@burlingtonwa.gov

We will contact you if we have interest in pursuing your class proposal. Please keep in mind that we are always planning programs well in advance of class dates and any proposals that are not considered feasible at the current time will be kept for consideration at a future date.

We would like to thank you for taking the time to share your ideas with us!

CLASS PROPOSAL QUESTIONNAIRE

Your Name: _____ Phone: _____
Address: _____ City: _____ Zip: _____
E-mail Address: _____

CLASS INFORMATION:

What type of class do you want to offer? (Check one)

Craft/Hobby Instruction Art Dance
 Trip or Tour Lecture/Informational Outdoor
 Other: _____

Name of class you would like to teach: _____

Class Description: _____

Ages of Class Participants: _____ # of Participants: Min _____ Max _____

Class Start Time: _____ End Time: _____ Days of the Week: _____

Session Dates: Begin _____ End _____ # of Weeks _____

Anticipated Cost for Participants: _____

Please indicate the age group(s) your class is designed for:

Preschool Youth (Ages 6-12) Teens (Ages 13-17)
 Adults Families Special Populations

What are your goals for your participants? _____

What specific skills will participants learn? _____

Are there any material costs involved in offering this class?

Materials	Cost	Materials	Cost
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	
		TOTAL COST:	

Do you need: Indoor Facility Outdoor Facility Other

Explain Needs: _____

Describe your background and expertise level relating to the class you would like to teach:

Please list you references that could tell us more about your abilities as an instructor?

NAME DAY PHONE RELATIONSHIP TO YOU

1. _____
2. _____
3. _____
4. _____

Do you have any other skills or talents that you would like to share with the community through a Parks and Recreation Class?

CONTRACTED INSTRUCTOR CHECK LIST

RECREATION PROGRAMS

Contracted Instructor Requirements:

- Background Check
- Signed City of Burlington Professional Services Agreement (contract)
- Completed W-9 Form

Additional Requirements *as determined by the city.*

- Copies of License or Certificate of Accreditation
- Liability Insurance: Instructor must provide a Certificate of Insurance to the City with endorsement which meets the following minimum requirements:
 1. The ***City of Burlington at 833 S. Spruce Street, Burlington WA 98233*** must be named as an “Additional Insured” on the certificate.
 2. The certificate MUST contain the statement ***“Additional Insureds include the City of Burlington, its Elected Officials, Appointed Officers, Employees, Volunteers and Agents”***.
 3. The liability insurance must provide a minimum threshold of \$1,000,000 per occurrence with \$2,000,000 General Aggregate coverage.
- City staff to inspect the facility to be utilized if not held at a City Facility.

NOTES or COMMENTS: _____

