



South Burlington Recreation & Parks

575 Dorset Street, South Burlington, VT 05403

802-846-4108

recreation@sburl.com

Program Proposal Form

Instructor Information:

Name: _____

Phone: _____

Class Information:

1. Proposed Course Title:

2. Course Description: (Please write the description for the brochure)

3. How many times will the class meet?

One time for _____ hours

_____ times for _____ hours each session

4. When do you prefer to teach the class? (Circle your preferences)

MONDAY

TUESDAY

WEDNESDAY

THURSDAY

FRIDAY

SATURDAY

5. When would you like to offer this class?

Start Date: _____

Completion Date: _____

6. At what time of the day would you like to offer this class?

Start Time: _____

Finish Time: _____

7. What is the Class Capacity?

Minimum enrollment: _____

Maximum enrollment: _____

8. Who will be most interested in this class? (Circle all that apply)

Males

Females

Both

Children (grades : _____)

Teens

Adults

Seniors

9. Any room requirements? (i.e. open space, gym, classroom, etc.)

YES NO

If yes, what kind of space is needed? _____

More Questions on the Back of this Form

10. Any equipment needs? YES NO

If yes, what equipment will be needed? _____

***Please understand that we have use of school facilities, but do not have use of their equipment. Some things can be made available to us at a cost and this will have to be added to the price of the program.*

11. Materials:

Are you supplying any materials for the class? YES NO

If so, will there be a separate materials cost? YES NO

If Yes, how much will that fee be? _____

What materials will you be providing to the participants?

What materials will the participants need to bring? (If you have a materials list please attach)

Will participants need to purchase these materials? YES NO

If so, where can these materials be purchased? _____

What is the approximate cost for these materials? _____

12. Do you plan to offer this class through any other organizations? YES NO

If so, when and where? _____

13. Instructor Compensation: How do you wish to be paid?

\$_____ per hour

\$_____ per participant

_____ Waive Fee

***Please note that we attempt to offer our classes at the lowest possible price as a service to our community. Instructor compensation is one of the factors considered when we determine whether to offer a class. The South Burlington Recreation Department welcomes those who wish to donate their time as a service to the community.*

Thank you for your interest in offering a class with the South Burlington Recreation Department. Your proposal will be reviewed by our staff. If your offering is determined to meet the needs of our community, you will be contacted within two weeks. Please call or email if you have any questions. 846-4108 or recreation@sbul.com

Send completed form to:

**South Burlington Recreation Department
c/o Holly Baker
575 Dorset Street
South Burlington, VT 05403**

OFFICE USE ONLY

Date Received: _____

Date Called: _____

Date Interviewed: _____

Class being offered: Yes No

If No, Reason: _____

Session Offered: _____

Date of Class: _____

Time Offered: _____