

**West Side Recreation & Park District**  
500 Cascade Place, Taft CA 93268  
661-763-4246 \* www.wsrpd.com \* steph@wsrpd.com

Dear Potential Instructor:

Thank you for your interest in the Recreation District. It is our goal to enhance the quality of life by providing classes and programs that meet the recreational interests and needs of the community. We currently offer several special interest classes, all taught by independent contracted instructors.

Enclosed you will find a "New Class Proposal" form. Please read it over carefully and consider the following questions:

- X Is the program going to enhance recreational, social and educational needs?
- X Will the program provide adequate financial return if it is offered, while still remaining reasonable to the participant?
- X Is the program currently offered by the Recreation District? Would your proposed program be a duplication or in direct competition with a current program?
- X Has this program been requested by the community? If so, please provide supporting information.

Be sure to fill out the enclosed form as completely as possible. It will enable us to evaluate your program and assess its ability to meet the needs of our community.

You may view the Recreation District's current class offerings online at:

[www.wsrpd.com](http://www.wsrpd.com)

Thank you for your time and interest in the Recreation District. **Please complete the attached proposal (in full) and return at your earliest convenience, via email, postal mail or in person.** Addresses are listed above. If you have any questions, please contact me at your earliest convenience.

Most Sincerely,  
Stephanie House  
Recreation Supervisor

**West Side Recreation & Park District**  
500 Cascade Place, Taft CA 93268  
661-763-4246 \* www.wsrpd.com \* [steph@wsrpd.com](mailto:steph@wsrpd.com)

**NEW CLASS PROPOSAL**

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

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**PROPOSED PROGRAM/CLASS INFORMATION**

Class Title: \_\_\_\_\_

Class Goals/Objectives: \_\_\_\_\_

\_\_\_\_\_

Class Description (used to assist in publicity – flyers, website, newspaper):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Age Group: \_\_\_\_\_ Participant Requirements: Min. # \_\_\_\_\_ Max. # \_\_\_\_\_

Desired Day of Week: \_\_\_\_\_ Desired Time: \_\_\_\_\_

Monthly, ongoing class       Session class (predetermined number of weeks)

The District reserves the right to set class fees. Do you have a recommendation? \_\_\_\_\_

How much prep time is needed at each class meeting for set-up? \_\_\_\_\_ Clean up? \_\_\_\_\_



## INSTRUCTOR INFORMATION

The District's current policy is that contract class instructors receive 75% of class fee revenue.

Is this acceptable?    Yes    No      If not, what amount would you suggest?

---

Have you ever taught, or are currently teaching, classes on a percentage basis?       Yes    No

If so, please list locations and percentages: \_\_\_\_\_

---

Have you ever taught the proposed class in question?       Yes    No

Please list and/or describe the experience/expertise you have on the proposed subject and why you feel that you would be a successful class instructor. Include any trainings and/or certificates:

---

---

---

---

Do you currently have a list of potential participants that are interested in this program?    Yes    No

Why do you think our community would be interested in this class/program? \_\_\_\_\_

---

---

---

Are there any additional comments / information about your program you would like to add?

---

---

---