



Think Inside the Triangle™



Contract Instructor Class Proposal Forms 2013

City of Tracy

Grand Theatre Center for the Arts

**City of Tracy
Contract Instructor Proposal Form**

Contract Instructor Proposal Form

Instructor's Name _____

Business/Organization _____

Address _____

City _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____ Website Address _____

Session (please choose one) Winter/Spring Summer Fall

Course Title _____

Course Description *(You may attach description supplementals)*

Extra Note for Participants or Additional Requirements: *(i.e. experience required, supplies to bring to class, class hotline, proper attire, etc.)*

Participant's Age Range _____

Class Day(s) (Choose below)

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Length of Class (i.e. 4 weeks, 6 weeks, 8 weeks) _____

Proposed Session Dates (i.e. 6/3-6/14)

Proposed Time _____ to _____

Proposed Advertised Course Fee \$ _____ *(take into consideration the standard 60/40 split)*

Supply fee (if applicable) \$ _____

Minimum # of Participants _____ Maximum # of Participants _____

Program Focus

What statement(s) does your class support? *(Check all that apply)*

Fostering Human Development (Fine Arts, Preschool, Cultural, Continued Learning, Skill Building, Nature Appreciation)

Connecting People to Others (Social, Neighbors Helping Neighbors, Friendships)

Strengthening Families (Participating Together, Appreciation, Parenting Skills)

Increasing Safety (Safe Habits, Prevention, Life Saving Skills, Crime Reduction)

Improving Health and Wellness (Fitness, Healthy Habits, Aerobic, Strengthening, Endurance, Stretching)

Method of Learning

How will participants in this program be engaged in learning? *(Check all that apply)*

Active Instructor: Instructor shows the physical example while participants watch and try to repeat steps. Instructor then checks for understanding and repeats example if necessary.

Passive Instructor: Instructor tells how it is done while participants try to initiate the steps.

Lecture: Instructor talks about subject while participants sit and listen.

Video: Participants watch a video.

Reading: Participants are given material to read and learn.

Parent Participation: Parents are encouraged to participate with child to repeat instructions to participant if necessary.

Take-Home: Participants take materials home with them.

Quiz: Participants take a written quiz on material covered in class.

Performance: Participants have the opportunity to perform as a group.

Small Groups: Participants work in small groups to come together on a solution.

Stations: Participants move among multiple stations.

Instructor Qualifications

Please list previous experience in providing this service along with a reference who can speak to your abilities/qualifications:

Organization: _____ Years: _____

Location: _____

Name: _____ Phone: _____

Organization: _____ Years: _____

Location: _____

Name: _____ Phone: _____

Organization: _____ Years: _____

Location: _____

Name: _____ Phone: _____

Please list other qualifications that may lead us to contract with you for this service:

Please provide a copy of your résumé or biography and a copy of all pertinent certifications held.

Program Outcomes

List up to 3 outcomes, by priority, using measurable action phrases such as: define, demonstrate, name, analyze... "As a result of their experience in this program, participants will be able to..."

1) _____

2) _____

3) _____

Outcome Measurement

How will the above outcomes be measured? _____

A success is defined as: _____

Need for Program

Please list other providers of a similar program in this community:

Name: _____ Phone: _____

Summary of Service: _____

Name: _____ Phone: _____

Summary of Service: _____

Name: _____ Phone: _____

Summary of Service: _____



**Arts Education Program
Contract Instructor Proposal Form**

Instructor/Collaborator Name: _____

How many classes and/or workshops are you proposing to offer? _____
(Please complete a separate form for each.)

Class/Workshop Title: _____

Is this course part of a sequence of offerings? Yes _____ No _____
If so, briefly explain where this course fits in the sequence:

Instructional Level: Beginning _____ Intermediate _____ Advanced _____
Seminar/Workshop _____ Other _____

Additional Notes on Instructional Level:

Below please explain briefly how this class may connect to California VPA (Visual and Performing Arts) standards (state arts education standards). A response is REQUIRED if the class is for school-age students (K-12). You may attach an additional sheet if necessary. Does the class/workshop do the following in an age-appropriate way?:

- 1) Enhance students’ artistic perception—if so, how?;
- 2) Enable creative expression—if so, how?;
- 3) Educate students about the historical and cultural context of your art form—if so, how?;
- 4) Increase students’ ability to make informed aesthetic judgments—if so, how?; and/or
- 5) Draw connections between your art form and other art forms or other subjects—if so, how?

How does this class specifically address the needs of Tracy’s artistic, cultural, heritage, or other types of communities?

Special room equipment needed for this class/workshop:

What materials/tools will you provide for class/student use?

What is the estimated fair market value per student of these materials/tools? _____

What materials/tools will you require students to purchase/bring to class?

What is the estimated retail expense per student of these materials/tools? _____

Will these materials/tools be of value in another class you'd like to offer?

Yes _____ No _____

Do you wish to hold a concluding event for this class/workshop, such as a recital, performance, art show, or other event? Yes _____ No _____

If "Yes," please complete the additional form: Arts Education Event Request Form (pp. 9-10 of these forms). NOTE: Events held outside of assigned class time/classroom are subject to Grand staff approval.

Please share any other notes or questions regarding your proposed class here:

This form, and forms for returning instructors, are also available for download here:

<http://atthegrand.org/OpportunitiesforInstructors>

Please contact Arts Education Coordinator Elizabeth Sayre at 209-831-6279 or Elizabeth.Sayre@ci.tracy.ca.us with questions.



Arts Education Event Request Form

NOTE: Events held outside of assigned class time/classroom are subject to Grand staff approval. In some cases, staff will recommend that you rent space at the Grand, if your event will make extraordinary demands on staff or the facility.

Date: _____

Instructor Name: _____

Course Title: _____

Date and Time for Desired Event: _____

Duration of Event: _____

Will the concluding event take place during class time? Yes _____ No _____

Room(s) at the Grand requested:

Will students be charged additional expenses in conjunction with the concluding event (costuming, supplies, or other expenses)? Yes _____ No _____

Additional Amount Required of Students? _____

Will tickets admission be charged and tickets sold for this event?
Yes _____ No _____

Ticket Price(s)? _____

Will you have aides or assistants helping you with the proposed event?
Yes _____ No _____

Have these aides been fingerprinted and cleared by the Tracy Police Department?
Yes _____ No _____

Names of aides/assistants: _____

Describe your technical needs for this event:

Lights?

Sound—including microphones, amplification, playback of recorded music?

Dressing Room Space?

Other Needs?

What audience numbers do you estimate for your event?

Other Notes: