



CITY OF GROVER BEACH

◆ Parks and Recreation Department ◆

Independent Contract Instructor Proposal

Please type or print neatly, individual forms must be received for each instructor.
Forms must be submitted in person to the Parks and Recreation Office, 1230 Trouville Avenue, Grover Beach.

PERSONAL INFORMATION

INSTRUCTOR NAME: _____

MAILING ADDRESS: _____

PHONE NUMBERS: _____
HOME WORK CELL

BIRTHDATE: _____ WEBSITE: _____

EMAIL ADDRESS: _____

SOCIAL SECURITY NUMBER: _____ - _____ - _____

DRIVER'S LICENSE NUMBER: _____ STATE: _____

BUSINESS TAX CERTIFICATE NUMBER: _____

Are you eighteen years or older? YES NO

Contract approval is contingent upon successful completion of a background investigation which may include, but is not limited to: Department of Justice criminal history check, employment history verification, Department of Motor Vehicles record check, educational experience verification, and a medical examination, which may include a drug screen.

As an adult, have you ever been convicted of a criminal offense by any court?

YES NO

Are you out on bail or on your own recognizance still awaiting trial for any matter?

YES NO

If you answered YES to either question, please explain on a separate page indicating date and listing offense, location, and, if applicable, penalty or disposition. *Please note, conviction of a crime is not an automatic disqualification, each case will be considered on its own merit.

REFERENCES: Please provide three references.

NAME	ADDRESS	PHONE	RELATIONSHIP / TITLE
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"Parks Make Life Better!"



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COURSE OUTLINE

CLASS / PROGRAM TITLE: _____

FACILITY REQUESTED: Community Center _____ Ramona Center _____

Park: _____ Business Location _____

DAY(S) OF WEEK: M T W TH F SA SU

CLASS SESSIONS: One Time Only Weekly Monthly

START TIME: _____ am / pm END TIME: _____ am / pm

PARTICIPANT AGE(S): _____ MALES FEMALES BOTH

PARTICIPATION: Minimum Enrollment _____ Maximum Enrollment _____

CLASS / PROGRAM DESCRIPTION: _____

REQUESTED COMPENSATION: \$ _____ per Hour Session

MATERIAL FEE REQUIRED? YES NO AMOUNT: \$ _____

This proposal is subject to approval by the Parks and Recreation Director. Upon approval, this proposal becomes part of the binding contract. **I certify that I have read and comprehend the City of Grover Beach Parks and Recreation Instructor Handbook. I further certify that all of the above information is true and correct. I understand that a background check will be conducted by the City of Grover Beach prior to proposal approval.**

Signature

Date

Office Use Only:	<input type="checkbox"/> BTC	<input type="checkbox"/> DOJ	<input type="checkbox"/> SS	<input type="checkbox"/> DL	<input type="checkbox"/> SA
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