



**Town of East Hartford  
Parks & Recreation Department**

50 Chapman Place  
East Hartford, CT 06108  
Phone: (860)291-7160  
Fax: (860)282-8239

***Program Proposal for Instructors***

Thank you for your interest in conducting a program for the East Hartford Parks & Recreation Department. We are always interested in your skills and ideas. If you would like to teach a program, or have a great idea for a new program, please fill out the following program proposal. We welcome any ideas that reflect the needs and desires of the residents of the Town of East Hartford.

**INSTRUCTOR  
INFORMATION**

Instructor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Business/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

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

Web Site Address: (if applicable) \_\_\_\_\_

To whom should checks be made payable? \_\_\_\_\_ Instructor \_\_\_\_\_ \*Business

*\* If you are proposing to run the class as a representative of your business, if your program is selected you must provide the Town of East Hartford with your Tax Identification Number and a copy of your Certificate of Insurance, adding the Town of East Hartford as an additional insured. A minimum amount of one million dollars in comprehensive liability insurance coverage is required.*

**PROGRAM  
INFORMATION**

**Course Title:** \_\_\_\_\_

**Detailed Course Description:** (equipment needed, etc)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Course Objectives:** (What will the participant learn/what are the benefits of taking this class)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PROGRAM DETAILS

Our programs generally run Mondays through Fridays, between 5:00 and 9:00 PM. Specific start and end times within that time period are negotiable, however continuity of service times is important. In addition, we offer some programs during the day and on weekends. Programs can run once or twice a week. The duration of the Fall, Winter, Spring and Summer program cycles is approximately 8—10 weeks.

**Brochure Description:** (please give a 3-4 sentence description of your program that will appear in the Department's Program Brochure...*Be Creative!*)

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Participant Ages: (*circle*)      Seniors      Adults      Youth (*include age range*) \_\_\_\_\_

Minimum # of students \_\_\_\_\_ Maximum # of students: \_\_\_\_\_

Day(s) you are proposing to hold the class: \_\_\_\_\_

Times: \_\_\_\_\_ AM/PM      to      \_\_\_\_\_ AM/PM

Type of space/facility needed: \_\_\_\_\_

Proposed instructor fee you would expect to charge per hour: (*if individual*)      \$ \_\_\_\_\_

Proposed fee you would expect to charge per participant: (*if business*)      \$ \_\_\_\_\_

Materials needed for the class: (*please note whether Parks & Recreation is to provide or participant is to provide their own, i.e. yoga mats, water bottles*) \_\_\_\_\_

Is there any additional costs to the participants?      \_\_\_\_ No      \_\_\_\_ Yes

If yes, amount \$ \_\_\_\_\_ What will this cost be for? \_\_\_\_\_

## EXPERIENCE

**Please list your experience with this activity both teaching and participating::**

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**\*\* Please include copies of any certifications**

Once this form is submitted, it will be reviewed by the Recreation Supervisor and every effort will be made to get back to you in a timely manner regarding the status of your proposal. Should you have any questions, please call the Parks & Recreation office at (860) 291-7160.