



Town of Payson Parks and Recreation

Dear Applicant,

Thank you for your interest in instructing a class/activity for the Town of Payson.

Please fill out the program proposal form, as completely as possible, and return it to the Parks and Recreation Department. If you have any questions, please email, and include your name, phone number and a Recreation Coordinator or the Recreation Manager will contact you.

The Town of Payson Parks and Recreation Department contracts special interest instructors for classes and activities that fall within our mission. There are three seasons per year: Fall, Spring, and Summer. Classes are considered for a variety of reasons; facility availability, public demand, budget, and current classes being offered.

Feel free to attach any references or examples of previous classes. After considering these factors, if your class is a possibility, you will be contacted to schedule an interview to discuss. All special interest instructors are background checked.

Again, thank you for your interest in the Town of Payson Parks and Recreation's Special Interest Program.

Thank you,

Payson Parks and Recreation

ppr@paysonaz.gov

928-472-5110

Town of Payson Parks and Recreation Program Proposal



Last Name:	First Name:
Address:	
Phone:	Email:

Title of Class or Activity: _____

Brief Description of Class: _____

Minimum # of Students: _____ Maximum # of Students: _____ Age of Participants: _____

List the dates, days of the week and times you are interested in teaching classes:

What fee would you like to receive per student (including materials)? _____

Materials needed for the class: (Please note whether Student or Instructor to provide):

List your experience with this activity (teaching/participating - attach copies of certifications):

Have you ever been convicted of, or have a felony charge currently pending? _____

If yes, give details including charges, dates, and locations. (A conviction will not necessarily disqualify an applicant): _____

Please list three references that we can contact regarding your work experience:

- 1.) _____ Phone: _____
- 2.) _____ Phone: _____
- 3.) _____ Phone: _____

Instructor Signature _____ **Date** _____

Office Use ONLY

Coordinator _____	Date _____
Rec Manager _____	Date _____
Director _____	Date _____

Instructor Contract Check List

Instructor _____ Date _____

- Contract Signed (Instructor, Rec Manager, Director)
- Tax Payer Identification Form Signed
- Authorized Presence Form Signed
- Review and Sign Guidelines
- Instructor Form: Public Info. Release

- Contractor Background Check Documentation
 - References (checked by Coordinator/Assistant)
 - Background Check (done by Rec Manager)

Sent to Admin _____

Staff Database entry _____

Filed in Contract Files _____