

City of Laguna Beach

Recreation Division

Mailing Address: 505 Forest Avenue, Laguna Beach, CA 92651

Community & Susi Q Center: 380 Third Street, Laguna Beach, CA 92651

Community & Recreation Center: 30516 S Coast Hwy, Laguna Beach, CA 92651

Email: recreation@lagunabeachcity.net | Phone: 949-464-6645

Dear Sir or Madam:

Thank you for your interest in becoming a contract instructor for the City of Laguna Beach. The City of Laguna Beach Recreation Division continuously looks for programs that are innovative and promote physical & emotional wellness within our community. If you are interested in proposing a program idea that supports our efforts in providing excellent community services, please submit the proposal information below.

Class proposals will be reviewed for program content, benefit to our customers, and cost. Once we receive and review completed proposals, we will contact you with information on next steps. There are no guarantees that your submittal(s) will be accepted by the City of Laguna Beach. Other requirements to become a Contract Instructor may include (but are not limited to): follow-up interview, City of Laguna Beach Business License, current certifications in CPR and AED and mandatory background check clearance.

Included below is general information we hope will be helpful in submitting a Contract Class Proposal form, please review carefully.

Ш	In order for us to consider your proposal, please submit the Contract Class Proposal Form (Attachment
	"A"), a brief resume and class outline.
	Submittal of the Contract Class Proposal Form does not guarantee that your proposal will be accepted.
	Once the committee receives and reviews your completed proposal, staff will get in touch with you.
	Please remember, the information you provide will be considered a proposal. There are no
	guarantees that your submittal(s) will be accepted by the City of Laguna Beach Recreation Division.
	The contract instructor receives 65% of selected class fee.
	If your proposal is accepted, staff will contact you with instructions on completing all other
	requirements.
	Contractor, and contractor's employees or substitute instructors, must clear a Background Check prior
	to teaching, instructing, or assisting. Fingerprinting requirements must be coordinated with
	the Recreation Division & the Laguna Beach Police Department to insure proper processing. The City
	will be responsible for the cost of the Contractor and the Contractor will be responsibility for any
	subcontractors or substitute instructor at a cost of \$32 per person.
	This step takes place after your application has been approved.
	The City reserves the right to observe classes at any time.
	City does not provide storage for equipment for any contract instructor.
	All registration must be processed by City staff or through our online registration system.
	Class rosters can be accessed online by instructors, or emailed to contract instructors.

Quarterly Timeline for Submitting Program Proposals:

Winter Session (January – March) – October 1
Spring Session (April – June) – January 1
Summer Camps (mid-June – August) – January 1
Summer Session (mid-June – August) – Feb 1
Fall Session (September – December) – June 1



City of Laguna Beach | Recreation Division Contract Class Proposal Form

Instructor Name:					
Address:					
City:	State:	Zip:			
Phone: ()	Cell: ()				
E-mail Address:					
Business Name:					
Experience, Background, Degree	s and Certifications:				
Class or Program Title:					
Description of Proposed Class or Program (50 words or less):					
Day(s) of the Week:	Number of Weeks:	Time:			
Target Age Range:	Minimum Class Size:	Maximum Class Size:			
Fee Proposed (total):	Material Fee (if any):				
Facility/Equipment Needs:					
Special Participant Requirements (if any):					

Attach a general outline of the proposed class(es) or program (i.e. syllabus for day or each week) or any other materials that may assist us in reviewing your proposal.

Attach a list of professional references and/or list other cities you're currently and/or have worked.



City of Laguna Beach | Recreation Division New Contract Instructor Checklist

INSTRUC	CTOR NAME:	
PROGRA	M/CLASSES:	
ADDRES:	S:	
PHONE:		
CELL:		
EMAIL: _		
SIGNATU	JRE:	
	FOR CI	TY USE ONLY
	CONTRACT SIGNED:	Date received:
	BACKGROUND CLEARED:	Date received:
	W-9:	Date received:
	BUSINESS LICENSE:	Date received:
	CPR/AED CERTIFICATION:	Date received:
	INSURANCE/SCMAF:	Date received: