

Rosy Mound

Enrichment Program Instructor Application

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

E-mail address: _____

Type of course you are interested in teaching: _____

Please provide a detailed description of the content of your course (attach additional page if needed, this description will be used in the offering brochure):

Approximately how many one hour classes would need to be scheduled to thoroughly teach your course? (The session is 6 weeks long)

- One Two Three I don't know
 Four Five Six

Which age group(s) would this course apply?

- Young 5's Kindergarten 1st Grade
 2nd Grade 3rd Grade 4th Grade
 5th Grade

What is the maximum number of students you would feel comfortable having in your class? _____

Please check your availability to teach the above course. Note all classes would be held after school from 4-5 p.m. and we are trying not to schedule any courses on Fridays.

- Mondays Tuesdays
 Wednesdays Thursdays

Applicants: Note this is a preliminary application. Please complete the attached sheet if supplies are needed for your class. This information will be used to aid us in establishing the class fee and budget for the class.