

2019

Planning Sheet for Bay View Association Summer Classes

Instructor _____

Email _____

Summer Phone _____ Winter Phone _____

Summer Address _____

Winter Address _____

Name of Proposed Course _____

Course Description (25 words for Program, 75 for web; new description required for all teachers & classes)

Number of Classes Required _____ Dates _____ Time: From _____ to _____

Please Mark Desired Dates:

June						
Su	M	T	W	Th	F	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

July						
Su	M	T	W	Th	F	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

August						
Su	M	T	W	Th	F	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

We will do our best to honor your preferences, but we cannot guarantee them. We will contact you if a change must be made. Keep in mind that it is best that you return this form ASAP as you are more likely to receive your preferred dates!

Will you require equipment beyond a black or white board? (i.e. TV, video/projector, overhead projector, piano, indicate # of chairs/tables, etc.) If so, please specify what you need on the line below:

Estimated per student class fee: _____ (Final fee is determined and collected by Bay View. Please include materials costs and travel expenses in your fee)

Will there be an additional charge to students for such items as books, crafts, and art supplies? Yes ____ No ____

Approximate cost for supplies: _____ Please include this in your class description.

Desired number of students in class: Your Maximum _____ Your Minimum _____

Are you willing to have students “drop in” for individual sessions for a fee if they aren’t in Bay View for the entire course? Yes ____ No ____

Would you like a host/hostess to introduce you? Yes ____ No ____

Standard payment policy is that the instructors will receive 100 percent of the first \$200 of tuition fees collected, minus \$3/student retained by Bay View, and 70 percent of remaining tuition fees collected, up to a maximum total compensation of \$500.

Do you wish to donate your teaching proceeds to Bay View Education? Yes ____ No ____

The Bay View Association is a 501(c)(3) non-profit organization. Contributions are tax-deductible to the full extent of the law. Bay View acknowledges that no goods or services were provided in exchange for this contribution. No additional value of the donor’s time or service may be deducted. Any materials purchased and used for the class may also be donated as an in-kind gift with proper documentation (receipts, etc.).

Instructor’s Resume (25 words or less):

Instructor’s Signature: _____ **Date:** _____

Please return this completed form by November 1, 2018 to education@bayviewassociation.org.