

Do you have a talent or skill that you'd like to share with others? The City of Bristol Parks and Recreation Department invites you to submit a program proposal for a future class. We recruit instructors to teach a wide variety of classes that provide the community with positive recreational experiences! We offer programs throughout the year in a variety of locations, to a wide range of ages and ability levels as part of our department mission to "enhance the quality of life for all Bristol residents".

Program proposals may be mailed:

Parks and Recreation Office
2nd floor City Hall 111 North Main St
Bristol, CT 06010
Attn: Jessie L. Petroka, Recreation Coordinator

Program proposals may be e-mailed to:

JessiePetroka@ci.bristol.ct.us

Proposals are considered for review based on factors including but not limited to community demand, relevance to City objectives, existing courses, and potential for cost recovery. Application does not guarantee acceptance.

Applicant Information

Name: _____ Date: _____
(First Name, Last Name)

Address: _____
(Street) (City) (State) (Zip)

Email: _____ Website: _____

Please list all education, certifications, and experience relevant as it pertains to becoming an instructor for the Parks and Recreation Department.

Submission Deadlines are as follows:

Fall Program Proposal must be submitted no later than August 1st

Winter Program Proposal must be submitted no later than November 1st

Spring Program Proposal must be submitted no later than January 1st

Summer Program Proposal must be submitted no later than March 1st

Proposed Class Information

Describe proposed class information here. The information you provide may be altered to best serve the community, coincide with facility availability and fit the direction of the department.

Proposed Class Title: _____

Have you taught this class or similar class before? Yes or No

If so, where _____

Creative Description of Program (*This would appear on advertising*):

What are the class benefits for the participant?

Program Length (*Please specify number of days and/or weeks*)

Program Frequency (*Please specify frequency, i.e., once a week, twice a week etc.*) _____

Program Time Preference (*Please specify time of day, i.e., morning, afternoon, evening*)

Program Day Preference (*Please specify a day (s) of the week*)

1st Choice: Day(s) Su M T W Th F SA Duration (time): _____ Duration (weeks): _____

2nd Choice: Day(s) Su M T W Th F Sa Duration (time): _____ Duration (weeks): _____

3rd Choice: Day(s) Su M T W Th F Sa Duration (time): _____ Duration (weeks): _____

Min. # of participants per session/class: _____ Max. # of participants per session/class:

Age Requirements: _____ to _____ years old

Type of Venue (i.e., Classroom, Park Pavilion, Athletic Field, etc.)

List your desired rate of pay for instructing the class_____

Will you provide your own materials? If no, please list materials needed_____

Additional Information (not required but recommended)

We encourage potential instructors to consider submitting the following additional information if applicable.

- Current resume
- Brief lesson plan for at least one class session
- Proposed handouts
- Flyer, brochures, or advertisements used for your class
- Photos or samples of class work