



City of Mission Viejo

Contract Class Proposal

Recreation and Community Services Department

Dear interested Contract Instructor,

Please review the information below for details on what the contract includes and the evaluation process.

APPLICATION PROCESS

STEP 1

- Fill out the attached “*Independent Contract Class Application*” form. This form can be emailed to Elizabeth Figarsky, contract class coordinator at efigarsky@cityofmissionviejo.org.
- Please consider the time of year you are proposing and submit your proposal on or before the deadline listed below. Ample time is required so the City can review your class information and submit information for the quarterly Mission Viejo Life brochure.

STEP 2

The contract class coordinator will review the details you submitted and determine if (1) the proposed course can be accommodated at the requested facility and (2) the proposed curriculum does not conflict with currently offered classes. This process may take 4-8 weeks, which starts at the submission deadline (listed below). Proposal deadlines are strictly enforced.

STEP 3

If the class proposal is accepted, the following documents must be provided for final approval to occur:

- Insurance and separate additional insured endorsement form required if deemed necessary by City. Insurance requirements to be determined by City of Mission Viejo Risk Management, signed contract with City rules and regulations, schedule of class offered and fees.
- Fingerprinting and criminal background checks are to be processed for all instructors, additional staff, substitute instructors, and volunteers.
- Final descriptions for all for promotional materials.

STEP 4

- Meet with the contract class coordinator to complete a site check.
- Finalize material fees or new information that participants will need to know before participating.
- Review the payment process.

QUARTERLY SUBMISSION DEADLINE				
	FALL	WINTER	SPRING	SUMMER
COURSE PERIOD	September-November	December-February	March-May	June-August
SUBMISSION DEADLINE	May 1	August 1	November 1	February 1

COURSE INFORMATION

- It is the responsibility of the contract instructor to teach the class, provide the course curriculum, and bring in all necessary materials or specialty supplies.
- Instructors determine the amount of courses they wish to offer each session. If necessary, the City reserves the right to decrease offerings based on space availability and enrollment.
- Instructors will set their own fees for each course.
 - Fitness Instructors with the Recreation and Tennis Centers will be paid a set instructor fee.
- Class content and quality is very important to the City. City staff has the right to observe classes/activities at any time.
- Each class is designated with a minimum/maximum of student enrollment by the instructor and City.
- The City finalizes the facility space, times, and dates.

INSURANCE & INDEMNITY

For those classes where the City requires proof of insurance coverage, the following applies:

- The City requires proof of general liability coverage in an amount not less than one million dollars per occurrence and two million in the aggregate for bodily injury, personal injury, and property damage.
- The City must be named as an additional insured on separate additional insured endorsement form(s) using the specific wording: “The City of Mission Viejo, its officers, officials, employees, agents, and volunteers.”
- For all classes the following applies:
- All course participants are required to sign a waiver of liability, indemnifying the City. The waiver is included on the City registration form and held on file with the City offices.
- Participants who are not listed on class rosters are required to pay before class and sign waiver to participate.
- Signing the waiver is not optional. Class participation will be denied if the waiver is not signed by participant before the class.
- All instructors, staff, and volunteers must be fingerprinted through the Department of Justice and complete a criminal background check. The cost of \$57 for fingerprinting will be paid by the instructor.
- Other insurance coverages may be required (workers’ compensation and employer’s liability, automobile liability, professional liability, etc.). The required insurance coverages for each class will be determined by City’s Risk Management and will depend on the content of the class, whether the instructor is an organization or business, and/or other factors relating to the class(es).
- Cost of required insurance coverages is the responsibility of the Instructor.

PAYMENTS & FEES

- If your course will be held at a City operated facility or park, including athletic fields and courts, or parks, contractors will receive 70% of the gross revenue from the total registration fees collected per session. The remaining 30% is collected for the City.
- If your course requires a material fee, an itemized list will be required. The material fee will not be split.
- If your class will be held outside of City public spaces, such as a private business location or online, the contractual split is 80% to the instructor and 20% to the City. Classes organized at a private facility will require a written agreement to use the facility. This will include an understanding that the City of Mission Viejo can advertise classes offered there, as well as accept all registration fees. Additionally, the City may require periodical site checks.
- The City collected share of revenue covers the following items: registration management (all processing fees and roster management); course inclusion in City’s quarterly Mission Viejo Life brochure, full-color, mailed to over 36,000 households and businesses; management of online registration; possible inclusion in the monthly e-mail mailings, and any additional marketing pieces to be designed and printed upon management approval.



CITY OF MISSION VIEJO INDEPENDENT CONTRACT CLASS APPLICATION

All applications are confirmed within two weeks of receipt. Please note, the process takes between 4-8 weeks. Staff will contact you by phone or email to confirm receipt and anticipated date of confirmation. If you have any questions, please contact **Elizabeth Figarsky** at efigarsky@cityofmissionviejo.org or by phone at **(949) 470-8462**. Thank you for your interest in becoming a contract instructor with the City of Mission Viejo Recreation and Community Services Division.

APPLICANT INFORMATION

NAME: _____ PH #: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP
CODE: _____

E-MAIL
ADDRESS: _____

CLASS PROPOSAL INFORMATION *Each individual course requires a complete form.

COURSE TITLE: _____

AGES: _____ MIN. ENROLLMENT: _____ MAX. ENROLLMENT: _____

MATERIAL FEE AMOUNT (Attach itemized list): _____

COURSE
DESCRIPTION: _____

COURSE
DESCRIPTION
FOR BROCHURE:
(25 WORDS OR LESS)

PREFERRED SESSION/SEASON (CHECK ALL THAT APPLY):
 SUMMER (June/July/Aug) FALL (Sept/Oct/Nov) WINTER (Dec/Jan/Feb) SPRING (March/April/May)

CLASS PROPOSAL CHART:

DAY(S) OF WEEK	START DATE	END DATE	TIME	COST	ALTERNATE DAY

FACILITY USE REQUEST

PLEASE SELECT THE DESIRED CITY FACILITY

COMMUNITY CENTER:

ROOM CAPACITY: _____

CARPET

SINK

LINOLEUM

RECREATION & TENNIS CENTERS

AEROBICS ROOM

GRASS SPACE

POOL

TENNIS COURT

BASKETBALL COURT

PARKS & FIELDS:

SOCCER FIELD

BASEBALL FIELD

FOOTBALL FIELD

PREFERRED PARK SITE

(WRITE NAME): _____

EQUIPMENT NEEDED:

TABLES # _____

CHAIRS # _____

PROJECTOR SCREEN

AUDIOVISUAL

PODIUM

WHITEBOARD (MARKERS NOT PROVIDED)

PRIVATE BUSINESS INFORMATION (IF APPLICABLE)

BUSINESS

NAME: _____

OWNER'S

NAME: _____

ADDRESS: _____

PROFESSIONAL EXPERIENCE (PLEASE ATTACH RESUME)

LIST ANY EXPERIENCE THAT RELATES TO THE THIS CLASS (INCLUDING OTHER CITIES & REGISTRATION):

LIST (2) **CITY OR BUSINESS** REFERENCES WHERE YOU OFFER(ED) YOUR PROGRAM:

(1) NAME: _____ CITY/BUSINESS: _____ PHONE: _____

(2) NAME: _____ CITY/BUSINESS: _____ PHONE: _____

ADDITIONAL RELEVANT CERTIFICATIONS/CREDENTIALS (IF APPLICABLE):

TITLE: _____ DATE: _____

TITLE: _____ DATE: _____

I, the undersigned, verify that the information provided in this application is complete and correct. I understand that providing false information could result in my application being fully dismissed from the review process and future potential contract opportunities.

APPLICANT

SIGNATURE: _____ **DATE:** _____

This form must be returned to the Recreation Division with attention to Elizabeth Figarsky, Recreation Coordinator.