

NEW COURSE PROPOSAL PACKET



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WELCOME!

Community Services Education invites you to share your knowledge and enthusiasm with our community by becoming a Community Service Instructor. The following forms are intended as a first step in your application process. They include a *New Course Proposal Form*, in which we expect you to describe and outline your new course ideas and an *Instructor Application Form* similar to a job application. Please complete these forms legibly in ink and submit them via mail or fax to the Office of Instruction. We will contact you to let you know if your course proposal has been approved or denied. Instructors are hired as independent contractors on a session-by-session basis through Community Services Education at Lassen Community College. You are responsible for filing the appropriate IRS forms and paying self-employment taxes, if hired.

Your proposal is considered complete when we receive the following items:

- 1. New Course Proposal Form**
- 2. Instructor Application Form**
- 3. Facility Use form**
- 4. Copies of any handouts, media, or supplies**

Operational Procedures for Establishing Community Service Classes

Community Service classes are designed for the physical, mental, moral, economic, or civic development of the persons enrolled. The class provides subject matter content, resource materials, and teaching methods that are deemed appropriate by the district. The class must be conducted in accordance with a predetermined strategy or plan and are open to all members of the community. The classes are not transferable and do not carry any credit or noncredit value and do not receive state apportionment or support.

1. Request of Community Service education must be submitted to the Office of Instruction for approval using the appropriate form (see attached).
2. Originator will be notified by the Office of Instruction upon approval or denial. (**Completed Instructor Contracts must be submitted prior to class start and must have HR approval**)
3. The Originator will be responsible for:
 - A. Maintaining college standards and safety.
 - B. Determination of cost per student based on estimated enrollment. If an insufficient number of students enroll to cover the cost of the course, the course will either be cancelled, student fees increased, or instructor remuneration decreased.
 - C. Development of course materials (handout materials, etc.).
 - D. Development of all marketing materials.
 - E. Ensuring that all students are registered for the class. Parent/guardian signature required for all minor students (see attached form).
 - F. Delivery of instruction.
 - G. Complete reconciliation form at end of course.
4. The college will be responsible for:
 - A. Assistance/approval of marketing materials for the course by the Office of Instruction.
 - B. Provision of facilities.
 - C. Originator compensation (not to exceed class revenue).
 - D. Processing of completed reconciliation.

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Fees for Community Service Classes

Community Service classes shall be offered at no cost to the District. The fees for such classes shall be set by the Office of Instruction with the approval of the Dean of Administrative Services and shall cover all costs to the District.

July 9, 2008

COURSE PROPOSAL & INSTRUCTOR APPLICATION FORMS



Course Proposal Form

Please Type or Print legibly and in ink. You may provide additional information on separate sheets and include attachments, but please complete the form in full. We use this information not just to evaluate your proposal, but for our website as well.

COURSE INFORMATION:

Course Title: A brief, but descriptive title can sell the class! Catchy titles work.

Prerequisites: Do students need any prior experience or skills to succeed in your course?

Brief Description: 100 words maximum. Please tell prospective students why they should take this course. *Present your description as it would appear on our Website.*

Student Learning Outcomes: After completing this class, what will the student be able to do? (list 3-4 items)

Brief Course Outline: Outline or list all topics that will be covered and the time schedule you will follow. List what material you will cover each class meeting. Use a separate sheet, if necessary.

Biographical Info: Each course is listed with a brief 1-2 sentence instructor biography. We offer each Community Service instructor the opportunity to have a biographical web page on our website for free. Please include a paragraph about yourself, highlighting your background in the course subject.

Course Preferences & Equipment: When scheduling a class, it is important that we know what accommodations you will need in addition to your preferred campus and meeting dates and times. We will consider your preferences, but ultimately reserve the right to schedule locations, set meeting dates and times, maximum enrollment. Equipment is limited, so please let us know what you will need.

Materials Fee: A *reasonable* materials fee may be requested of students. However, **we must pre-approve your fee** (for full disclosure to prospective students) and **you must provide copies of materials lists and any media or publications that you will be selling for our office to keep on file.**

Pay: Instructor pay is based upon fees collected for enrollment.

Instructor Application Form

Please complete this application legibly and in ink. Please complete the form in full regardless of any redundancy. We appreciate your understanding, as this application is necessary for employment as an Independent Contractor with Community Services Education at Lassen Community College. Your personal information is kept private and secure.

Contact us if you have any questions or need additional information:

Lassen Community College, Office of Instruction
530.251.8819 or
mcouso@lassencollege.edu

July 9, 2008



COMMUNITY SERVICE COURSE PROPOSAL FORM

PLEASE TYPE OR PRINT LEGIBLY IN INK

CONTACT INFORMATION

Name: _____ Day Phone: _____
(First, Last)

Email: _____

COURSE INFORMATION

Course Title: _____

If this course has been taught before, List where and dates taught: _____

Prerequisites:

Brief Description:

Target Audience:

Student Learning Outcomes:

Brief Course Outline:

Biographical Info:

COURSE PREFERENCES:

EQUIPMENT NEEDED:

Days of week Check: M T W TH F Sa Su

Meeting Times: _____

Proposed Dates: _____

Number of Class Sessions: _____ At _____ hours each.

Maximum Enrollment: _____

Minimum Age: _____

Location: _____

Large Tables

VCR/DVD

Overhead Projector

Slide Projector

MATERIAL FEES

Fee: \$ _____

Handouts (Title & no. of pages) _____

Supplies: _____

To cover the following:

July 9, 2008

LASSEN COMMUNITY COLLEGE
REQUEST OF FACILITY FOR COMMUNITY SERVICE COURSE



Return to: Office of Instruction

Today's Date: _____

Instructions: Please type or print clearly. An approved copy will be returned to you. This is not a request for scheduling a class.

Office/Group making request: _____ Contact Phone: _____

Person in Charge: _____ Approximate Number to be Present: _____

Building and Room Desired: _____

Day(s) of Week: Mon Tues Wed Thur Fri Sat Sun Date of Event: _____

Hours in Facility:

Check-in Time: _____ a.m./p.m. Check-out Time: _____ a.m./p.m.

Event Begins: _____ a.m./p.m. Event Ends: _____ a.m./p.m.

Nature or Purpose of use: _____

Is this event open to the public? ____ Yes ____ No

Person Requesting Facility: _____

Signature

Phone #

FACILITY PRIORITIES:

- 1) Credit Courses 2) Non-Credit Courses 3) Community Service Courses 4) Community Requests**

Will Food Service be needed? You will need prior approval from the Food Service Manager 251-8936.

Facility Available: Yes No Cafeteria Supervisor Signature _____

=====FOR OFFICE OF INSTRUCTION USE ONLY=====

Date Received: _____ Facility Available: Yes ____ No ____
 _____ Verified By _____ Date _____

Building Supervisor: _____ Date: _____

Office of Instruction or Student Services: _____ Date: _____

Dean of Administrative Services: _____ Date: _____

It is your responsibility to make sure you leave the room you are using in its original state.

Additional Notes:

FACILITY USER MUST HAVE AN APPROVED COPY OF THIS FORM IN THEIR POSSESSION WHEN FACILITY IS IN USE.

c: Maintenance-E. Rulofson c: Custodial- C. Freeman c: Applicant c: Switchboard c: Food Services

July 9, 2008



COMMUNITY SERVICE INSTRUCTOR APPLICATION

CONTACT INFORMATION

Social Security Number: _____ Home Phone: _____

Last Name: _____ Business Phone: _____

First Name: _____ Cell Phone: _____

Address: _____ Fax: _____

City, State, Zip: _____ Email: _____

EXPERIENCE DIRECTLY RELATED TO THE COURSE

I, the undersigned, understand that completing this form does not imply that employment is imminent with Lassen Community College. It merely indicates that I have an interest in teaching a Community Service Course. I further understand that an instructor of Community Service is not part of the classified service and is not guaranteed employment. Community Service Classes are subject to changes and cancellation due to lack of enrollment or other reasons as determined by the Vice President. Notice of course cancellation may be given verbally.

Signature: _____ Date: _____

July 9, 2008

REGISTRATION & CONSENT FORM
LASSEN COMMUNITY COLLEGE
 COMMUNITY SERVICE CLASSES
 P.O. BOX 3000
 (530) 257-6181



ENROLLEE INFORMATION:

Name _____
First Name Last Name

Address _____ Birthdate _____

City _____ State _____ Zip Code _____

Day Phone _____ Emergency Phone Number _____

ACTIVITY TITLE & NUMBER	DATE(S) OF ACTIVITY	FEE

PARENT/GUARDIAN PLEASE COMPLETE AND SIGN THE FORM BELOW IF ENROLLEE IS UNDER 18. REGISTRATION WILL NOT BE PROCESSED WITHOUT SIGNED CONSENT FROM PARENT.

I grant approval for my child _____ to participate in the above program(s) and release Lassen Community College District, it's Board of Trustees, District Officers, employees and servants from any liability arising from child's participation in said program(s). I understand the College provides accident insurance only as a secondary policy to any policy under which my child may be covered. Consent is hereby given to Lassen Community College staff to seek or give medical aid as required in case of emergency.

Parent/Guardian Signature _____ Date _____

LASSEN COMMUNITY COLLEGE
COMMUNITY SERVICE FEE DEPOSIT



COURSE TITLE: _____

Total number enrolled: _____

Fee charged per enrollee: \$ _____

Total Enrollment Fee Collected: \$ _____

AMOUNT TO BE DEPOSITED: \$ _____

Deposit into Budget # 11-000-000-0-000000-48872 (Community Service Revenue)

Instructor/Facilitator Signature: _____ Date _____

Business Office Signature _____ Date _____

Fees collected are to be taken directly to the Business Office for deposit.
Please return this form to the Office of Instruction after Business Office has signed off.

LASSEN COMMUNITY COLLEGE

COMMUNITY SERVICE RECONCILIATION

Office of Instruction use only/after course is complete



ACTUAL EXPENSES:

Total Enrollment Fees Collected: \$ _____ (from deposit slip)

Cost of Facility: \$ _____

Cost of Advertising: \$ _____

Cost of Materials/Supplies: \$ _____

Cost of Meals: \$ _____

Cost of Housing: \$ _____

Other.....Please Explain: \$ _____

Please turn in all receipts to the Office of Instruction

College Administrative Reimbursement: \$ _____
(\$50 if student fees collected is under \$400.00, \$100.00 if student fees collected is over \$400.00)

Remaining Student Fees: \$ _____

College Income:
(10% minimum of remaining student fees) \$ _____

Total Actual Expenses: \$ _____

Remaining Balance: \$ _____

Remaining balance payable to: Instructor/Facilitator: _____

Account # _____

Other _____
(Please explain)

Account # _____

Instructor/Facilitator Signature _____ Date _____

Office of Instructional Services _____ Date _____

Instructor pay: 11-00-820-1-682010-51330 (summer) 11-00-820-1-682010-51300 (fall/spring)
Instructional aide pay: 11-00-820-1-682010-52430 Facility: 55660 Supplies: 54300 Advertising: 55930,

July 9, 2008

LASSEN COMMUNITY COLLEGE
COMMUNITY SERVICE INSTRUCTOR CONTRACT



Course Title & Number: _____

Instructor Name: _____

Address: _____

Phone Number: _____

SSN: _____

Instructor will be paid: (check one)

Hourly Rate \$ _____ per hr x _____ # of hours TOTAL \$ _____

Daily Rate \$ _____ per day x _____ # of days TOTAL \$ _____

Lump Sum TOTAL \$ _____

Account # _____

*Community Service course regulations require that no instructor/umpire will be paid if amount to be paid exceeds amount of funds deposited into the community service account.

Instructor Signature: _____ Date _____

Dean of Instruction: _____ Date: _____

ALL Human Relations paperwork **must** be completed prior to instructing a Community Service Course. Please contact Susie Hart at 530-251-8811 for a complete hiring packet.

I verify that all required personnel documentation has been completed.

HR Signature: _____ Date: _____

OFFICE USE ONLY:

Submitted to payroll by: Initials _____ Date: _____

July 9, 2008