



# Community Education

South Kitsap School District

Department of Community Relations

1962 Hoover Ave S.E. \* Port Orchard, WA \* 98366 \* 360-874-7005

On behalf of the South Kitsap School District's Community Education Program we would like to invite you to fill out a class proposal for our program. Your unique knowledge and expertise is valuable to us and your involvement will sincerely contribute to the overall success of Community Education.

*Community Education* is a program designed to meet the lifelong learning needs of our community through exciting enrichment programs and workshops for all ages. Our goal is to offer a variety of educational, practical and rewarding classes that supports building a community of learning.

Community Education instructors work with us as independent contractors. The Instructor remits 30% of the total class registration fees from each class to the District to cover the costs of facility usage and the administration of the Community Education Program. The cost of your class will be discussed and finalized in an interview.

On the attached Instructor Proposal Form, you will find areas where you can give us your background and experience teaching your particular area of interest, input your preference of time, day of the week and target age group.

**Please return completed form to:**

**Community Education Specialist  
Suzie Butler  
South Kitsap School District  
1962 Hoover Ave SE  
Port Orchard, WA 98366**

**We will contact you for an interview if your class proposal fits our program. Please call me with any questions regarding Community Education at (360) 874-7005.**

**Sincerely,**

**Suzie Butler  
Community Education Specialist**



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## Community Education Instructor Proposal

We are looking for quality classes with a broad appeal for all members of our community. All classes will be held at Marcus Whitman Junior High (Mondays or Wednesdays) or Orchard Heights Elementary (Tuesdays or Thursdays) unless special arrangements are made with the Community Education Specialist. Specify the time and date between 5 – 8 p.m.

**See back page to fill out instructor experience, course outline, etc.**

Instructor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Class Title: \_\_\_\_\_

Target Age Group: \_\_\_\_\_ Class Min: \_\_\_\_\_ Class Max: \_\_\_\_\_

Suggested Class Fee: \_\_\_\_\_ Supply Fee: \_\_\_\_\_

Class Description: \_\_\_\_\_

\_\_\_\_\_

Class supplies student needs to bring: \_\_\_\_\_

Class supplies instructor will provide: \_\_\_\_\_

Day(s) of week preferred: \_\_\_\_\_ Time preferred: \_\_\_\_\_

Room Setup Needs (Based on availability): \_\_\_\_\_

\_\_\_\_\_

Please indicate what session you would like to offer this class:

Fall (Sept-Nov)

Winter (Jan-March)

Spring (April-June)

Any other information: \_\_\_\_\_

Please submit form to:

Suzie Butler, Community Education Specialist

1962 Hoover Ave SE

Port Orchard, WA 98312

Phone: 360-874-7005

Fax: 360-876-7675

[butlersu@skitsap.wednet.edu](mailto:butlersu@skitsap.wednet.edu)

# **Community Education Instructor Proposal**

**Instructor Biography:**

**Instructor Resume:**

**Instructor Course Outline / Syllabus:**

**References: (Optional)**

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