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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, an Instructor Worksheet to walk you through the projected expenses, an Instructor Application Form similar to a job application, and an Insurance Quote Form to help assess projected expenses. Please complete these forms legibly in ink and submit them via mail or fax to the Academic Services office. 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 Worksheet
3. Facility Use Form
4. Instructor Application Form
5. 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 be 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. Completed proposal packet must be submitted to the Academic Services office for approval. No community service course can be offered without approval from Academic Services.

2. Originator will be notified by the Academic Services office upon approval or denial. Special note: If approved, completed Instructor Contracts must be submitted prior to class start and hiring paperwork must be completed for approval by the Human Resources Director.

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. The marketing materials must conform to the Graphic Standards as stated in the current LCC Graphic Standards Handbook
   E. Ensuring that all students are registered for the class. Parent/guardian signature required for all minor students.
   F. Delivery of instruction
   G. Completion of Reconciliation Form at end of course

4. The College will be responsible for:
   A. Assistance/approval of marketing materials for the course by Academic Services office
   B. Provision of facilities
   C. Originator compensation (not to exceed class revenue)
   D. Processing of completed reconciliation

**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.

Effective 10/1/12
COURSE PROPOSAL AND 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 also for our website.

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 will 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 and 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 and maximum enrollment. Equipment is limited, so please let us know what you will need.

Course 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, Academic Services
530.251.8819 or LCCAcademicservices@lassencollege.edu

PLEASE SUBMIT FORMS AT LEAST TWO WEEKS BEFORE TO ALLOW FOR PROCESSING
## CONTACT INFORMATION

Name: ____________________________________________________________  Day Phone: ____________________
First      Last
Email: ____________________________________________________________

## COURSE INFORMATION

Course Title: ______________________________________________________________________________________________

If this course has been taught before, list where and dates taught: __________________________________________________

<table>
<thead>
<tr>
<th>Prerequisites:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief Description:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Target Audience:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student Learning Outcomes:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Brief Course Outline:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biographical Info:</td>
</tr>
</tbody>
</table>

### COURSE INFORMATION

- **Days of week Check:** [ ] M [ ] T [ ] W [ ] TH [ ] F [ ] Sat [ ] Su
- **Meeting Times:** ________________________________
- **Proposed Dates:** ________________________________
- **Number of Class Sessions:** ________ At ________ hours each
- **Maximum Enrollment:** ________________________________
- **Minimum Age:** ________________________________
- **Location:** ________________________________

[ ] Approved  [ ] Denied  Instructional Administrator: ________________________________
# INSTRUCTOR WORKSHEET

## PROJECTED EXPENSES:

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>College Administrative Reimbursement</td>
<td>$____________</td>
</tr>
<tr>
<td>(If student fees collected is under $400.00 or $100.00 if student fees collected is over $400.00)</td>
<td></td>
</tr>
<tr>
<td>College Income</td>
<td>$____________</td>
</tr>
<tr>
<td>(10% minimum of remaining student fees)</td>
<td></td>
</tr>
<tr>
<td>Cost of Facility</td>
<td>$____________</td>
</tr>
<tr>
<td>Cost of Advertising</td>
<td>$____________</td>
</tr>
<tr>
<td>Cost of Materials</td>
<td>$____________</td>
</tr>
<tr>
<td>Cost of Supplies</td>
<td>$____________</td>
</tr>
<tr>
<td>Cost of Meals</td>
<td>$____________</td>
</tr>
<tr>
<td>Cost of Housing</td>
<td>$____________</td>
</tr>
<tr>
<td>Cost of Instructor (Salary)</td>
<td>$____________</td>
</tr>
<tr>
<td>Insurance—Complete form on page 8</td>
<td></td>
</tr>
<tr>
<td>Other....Please Explain</td>
<td>$____________</td>
</tr>
<tr>
<td><strong>Total Projected Expenses:</strong></td>
<td>$____________</td>
</tr>
<tr>
<td>Projected Number of Students:</td>
<td></td>
</tr>
<tr>
<td>Cost per Student</td>
<td>$____________</td>
</tr>
<tr>
<td><strong>Total Projected Expenses/# of Students</strong></td>
<td>$____________</td>
</tr>
</tbody>
</table>

**For Office Use Only**

Insurance Quote from HR: $____________
(Based on the # of students)
LASSEN COMMUNITY COLLEGE
REQUEST FOR USE OF FACILITY FOR COMMUNITY SERVICE COURSE

Return to: Academic Services

Today’s Date: ____________________

Instructions: Please fill in the top portion. An approved copy will be returned to you. This is not a request for scheduling a class.

Office/Group making request: ________________________________

Campus Phone: ______________

Person in Charge: ____________________________

Approximate Number to be present: ________________

Building and Room Desired: ______________________________________

*For Facility Fees, please contact Academic Services at 251-8819

Day(s) of the Week: Mon ☐ Tues ☐ Wed ☐ Thurs ☐ Fri ☐ Sat ☐ Sun ☐

Date(s) of Event: ____________________________________________

Hours in Facility:

Check-In: __________________________

Check-Out: ________________________

Event Begins: ______________________

Event Ends: ________________________

Nature or Purpose of use: ______________________________________

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

Will Catering be needed? ☐ Yes ☐ No

If Yes, you will need prior approval from the Food Service Coordinator

Person Requesting Facility: ________________________________

Signature ____________________________ Phone __________________________

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

For Food Services Use Only

Facility Available: ☐ Yes ☐ No

Food Service Coordinator: ____________________________

Signature ____________________________

For Academic Services Use Only

Date Received: ____________________________

Facility Available: ☐ Yes ☐ No

Verified By: ____________________________

Date: ____________________________

Additional Notes:

FACILITY PRIORITIES: 1) Credit Courses 2) Non-Credit Courses 3) Community Services Courses 4) Community Requests
COMMUNITY SERVICE INSTRUCTOR APPLICATION

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: ___________________________

INSURANCE QUOTE

Effective 10/1/12
SPECIAL RISK COVERAGE QUESTIONNAIRE

Please provide all information requested. This must be current.

1. Name of Policy Holder: Lassen Community College

2. Name of Activity: 

3. Give Details of Event: 

4. Dates of Activity: 

5. Location of Activity: 

6. Includes Travel? Yes ☐ No ☐

7. Methods of Transportation: 

8. Number of Participants: 

9. Age of Participants: 

10. Number of Counselors: 

11. Sports Related: Yes ☐ No ☐

Duration

1. How Many Weeks: 

2. How Many Days per Week: 

3. How Many Hours per Day: 

Effective 10/1/12