



PARKS & RECREATION DEPARTMENT CLASS PROPOSAL FORM - FOR NEW & RETURNING CONTRACTORS

Send To: contractclasses@cityofconcord.org;

Fax To: 925-671-3449

(Please provide separate forms for each class or age group)

| INSTRUCTOR INFORMATION | | | | | | | | | | | | |
|---|-------------------------------|-------------|----------------------|-----------|--|-------------|-------|--------|---------|----------------------|--|--|
| Last Name KHU | Firs HURANA Nan | | | | DITU | | | | | M.I. | | |
| Name of Busi | - Numo - | | | | | | | | | | | |
| or Organization | on GURUS EDUC | ATION | | | | | | | | | | |
| | 42000 CHRISTT STREET # 122 | | | | City FREMONT State | | | | CA | ^{Zip} 94536 | | |
| Home or Business Phone # 510-573-2497 | | | | Cell # | 310-373-2437 | | | | | | | |
| Email info@guruseducation.com | | | | | Web Address www.guruseducation.com | | | | | | | |
| Who should checks be payable? ☐ Individual or ☐ Busi | | | | | For tax purposes Only Social Security or Tax ID # 45-4255717 | | | | | | | |
| CAMP DESCRIPTION | | | | | | | | | | | | |
| Proposed Camp Title: PUBLIC SPEAKING AND DEBATE LEVEL 1 | | | | | | | | | | | | |
| Camp Description for Activity Guide (Include benefit statements and "you" language, 50 words max) | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| This summer camp focuses on teaching delivery and presentation skills but also provides foundation of critical thinking. With lot of thought-provoking and stimulating topics and exciting activities to write and speak, students learn how to manage public speaking anxiety, present themselves with confidence, how to make strong arguments by providing reasoning and evidence. | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| CAMP PREFERENCES | | | | | | | | | | | | |
| Number of CAMP Sessions5 | | | | | | | | | | ☐ Afternoons (1-4p) | | |
| When do you prefer to teach this CAMP in 2016? (check all that apply) ☐ June 13-17 | | | | | | | | | | | | |
| | | | CA | MP IN | FORM | ATION | | | | | | |
| Age Min. 10 | in. 10 YEARS Age Max 14 YEARS | | | | Min. class enrollment 7 Max. class enrollment | | | | | | | |
| Supply/Material Fee: (Payable to Instructor 1st Class) N/A Items provided: WORK BOOK | | | | | | | | | | | | |
| | Requirements: | | OM OFT UP | | | | | | | | | |
| | Start/End Date(s) | Start/End | OM SET UP Time(s) | No Camp | Dates | # of | *Sugg | jested | Per day | (Office Use Only) | | |
| Days | Preference | Prefer | ence | (i.e. Hol | idays) | Days | Cam | p Fee | Fee | Course Number | | |
| M-F | 06/20/16-06/24/16 | 9:00AM- | 12:00PM | N/A | | 5 | \$ | 199 | | | | |
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| | | 1 | <u> </u> | Office | Use Onl | | 1 | | | | | |
| Date Received | | Staff Initi | Staff Initials | | | CLASS Entry | | | | Staff Initials | | |

CONTRACT INFO

*Suggested Camp Fee should account for the contractual percentage split between instructor and City.

- Compensation begins at 50% of collected fees (this is suggested and not an agreed upon amount).
- Compensation is based on Resident rate only. A \$3 processing fee and a non-Resident rate will be added to your suggested fee. *i.e. IF camp meets 5 days at a cost of \$100, the camp would list for \$103 Res and \$108 non-Res. And...

| IF the camp is a 50% agree | | | | | | | | | | |
|---|-----------------------|--------------------|---------------------|--|--|--|--|--|--|--|
| AGE G | SUBSECTION | | | | | | | | | |
| ☐ PreSchool (2-5) ☐ School Age (6-12) | ☐ Teens (13-17) ☐ Oth | ner 4TH - 8TH GRAD | □ Day Camps □ Other | | | | | | | |
| 2016 SUMMER CAMPS ONLY GUIDE (SPECIAL EDITION) | | | | | | | | | | |
| Summer Camps ONLY Guide (June 13 – Aug 19); Proposals Due December 1, 2015 (or earlier) All camps must be 5 days (M-F); Full Day Camps must be 9a-4p. Half Day Camps must be 3 hours 9am-Noon, or 1-4pm. Things to consider when creating a camp: parents work schedules, location of camp, etc. Late or incomplete proposals may result in not being part of the guide. | | | | | | | | | | |
| REFERENCES | | | | | | | | | | |
| □ New Contractor: Please provide 3 references with phone numbers. □ Continuing Contractor with the City of Concord | | | | | | | | | | |
| Name | Phone | | Email | | | | | | | |
| Name | Phone | | Email | | | | | | | |
| Name | Phone | | Email | | | | | | | |
| INSTRUCTOR INFO | | | | | | | | | | |
| Your Experience and Qualifications: Our teachers and the members of staff are professional teachers with tremendous experience teaching Public Speaking, Debate, Philosophy, American Literature and Theater Arts. The team includes high school debate coaches, directors, artists and authors. Our entire team is very passionate about teaching communication skills and debating. We believe that these are very important skills that each student should master. | | | | | | | | | | |
| Your Bio: skills, certifications, accomplishmentsas they pertain to what you are teaching. This info may be used in in our Activity Guide, or on our social media i.e. the City of Concord's Facebook page, or in other marketing efforts. Limit 50 words. Gurus Educational Services conducts basic and advanced programs and tournaments in Public Speaking, Debates and Personal Finance throughout the Bay Area. | | | | | | | | | | |
| We have helped thousands of students overcome the fear of public speaking and provide forums to engage in constructive debating. Our classes and camps are very well attended. Our staff includes highly qualified and talented teachers. Please see our staff page to know more about them. | | | | | | | | | | |
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| INSTRUCTOR REQUIREMENTS | | | | | | | | | | |
| IF you are selected to teach a class through the City of Concord Parks & Recreation Department, there are a variety of things that you will be required to do, including, but not limited to the following | | | | | | | | | | |
| □ Insurance: City Attorney determines level of insurance. Businesses are required to name COC as additional insured \$1mil. □ Live scan (fingerprint): Independent contractors must get prints done. \$32 charge to DOJ. Businesses may provide letter (ask how). □ TB clearance (every 2 years): If working with minors (under 18), proof of TB clearance required. Business letter may apply (ask). □ W9: All contractors must provide an updated W9 annually. □ Independent Contractor Acknowledgment form: All contractors must sign this form annually. □ Mandatory contractor's meeting: All contractors must attend the contractor meeting annually. □ Other | | | | | | | | | | |

Please provide camera ready photos (300dpi). Photos are encouraged during your classes. Please send all photos to the Concord Parks & Rec department at the information below...

Return Proposal Forms to: Concord Parks & Recreation Department / Attn: Christopher Roke 1950 Parkside Drive MS/10; Concord, CA 94519 (925) 671-3319 / Fax (925) 671-3449 / email: contractclasses@cityofconcord.org

*All proposals will be reviewed by the Parks & Rec Marketing team and/or by a Marketing team member. We make no guarantees to work with your program just because you submit a form. Not all proposals are going to be a good fit for us or our facilities. In addition, if a class is not producing, we reserve the right to cancel classes and/or no longer offer the program.