

Vendor Course Instructor Application

This application must be completed and signed by the vendor only.

Information designated by * is required, your application will be returned if not complete.

*Instructor/Contact Person's Name: _____

*Business Name: (dba) _____

*Street Address: (PO Box is insufficient) _____

*City, State, Zip: _____

County: _____ Email Address: _____

*Area Code and Phone Number _____ Fax Number: _____

*CA Driver's License Number: _____ *Expiration date: _____

*Are you 18 years or older? Yes No (If under 18, please submit application without LiveScan)

*California Teaching Credential Held, if none, so state: _____ Expiration Date: _____

Subjects authorized by CA Credential: _____

***Are you an Educational Facilitator or teacher for our program? ___ Yes ___ No**

Teachers employed by the district may not also be contract vendor instructors. You may present a group class for an additional stipend. Please discuss with your School Director.

***If this application is being submitted by a business employing one or more persons who will work directly with students, the CONTRACTOR shall conduct a criminal background check of its employees through the Department of Justice (DOJ) in accordance with Education Code Section 45125.1 and, upon receipt of DOJ clearance, certify to the SCHOOL that no employee of the CONTRACTOR working with students of the SCHOOL has been convicted of a violent or serious felony as defined by statute, nor has a criminal action pending upon charges of commission of a violent or serious felony as defined by state. See *Employer Fingerprint Clearance Form*.**

***Proposed Course Information**

(This is required information)

Course Title: _____

Course description: _____

*Please attach separate description if more space is needed.

If more than one course will be offered, please attach the Proposed Course Information. If you are a recreation department and/or you offer a variety of classes, please attach your course pamphlet or catalog.

Attached: _____ yes

Cost of Course: _____ per: _____ (Hour, Month, Course)

Instructional Period: _____ (Hourly) How often will you meet? _____ (Daily, Weekly, etc...)

Materials to be used: _____ Cost of

Materials: _____