



# COURSE PROPOSAL FORM

**INSTRUCTOR NAME:** \_\_\_\_\_

**BUSINESS NAME (IF ANY):** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**PROPOSED CLASS TITLE:** \_\_\_\_\_

**CLASS DESCRIPTION:** \_\_\_\_\_

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**PROPOSED INSTRUCTOR FEE:** \_\_\_\_\_ **OFFERED MONTHLY?** \_\_\_\_ **OFFERED BY SESSION?** \_\_\_\_  
**MINIMUM STUDENTS** \_\_\_\_\_ **MAXIMUM STUDENTS** \_\_\_\_\_ **PRICE OF CLASS/COURSE:** \_\_\_\_\_

**PLEASE RETURN THIS FORM ALONG WITH A RESUME, REFERENCES  
AND ANY LICENSES/CERTIFICATIONS TO:**

**PALM HARBOR PARKS AND RECREATION**  
**1500 16TH STREET**  
**PALM HARBOR, FL 34683**

**IF YOU HAVE ANY QUESTIONS, CONTACT THE RECREATION COORDINATOR AT  
727.771.6000 OR EMAIL: RECREATION@PHPARKSANDREC.ORG**