



City of National City Contract Instructor Application

(Additional sheet(s) may be attached to complete this information)

Please print clearly

Instructor Name:	Mailing Address (street, city, state, zip):
Business Name:	
Email Address:	Daytime Phone:
Website Address:	Evening Phone:

What type of class(es) are you interested in teaching?

Please indicate your background and experience as it relates to the class(es) you are interested in teaching.

Will you be the only instructor teaching the class(es) Yes No

If no, please include a list of instructors who will be teaching or assisting the class(es).

Please feel free to attach a copy of your resume if it pertains to the class(es) you are interested in teaching.

Recreation Staff Only

Application received on <input style="width: 150px;" type="text"/>	Notes:
Application completed? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Application approved? <input type="checkbox"/> Yes <input type="checkbox"/> No	
First quarter instructor will teach: <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Application denied	