

TACONIC HILLS CENTRAL SCHOOL

CONTINUING EDUCATION PROGRAM



Request for Proposal

The mission of our Continuing Education Program is to provide community members with a range of academic, athletic, artistic, business, hobby and recreational workshops at our K-Life Learning Center campus. Our continuing education program will reflect our district's increased focus on lifelong learning.

Timetable:

Workshops may be one day seminars or may run for multiple sessions. Continuing Education program classes will not be conducted when school is not in session, which includes school closing during inclement weather periods. Your proposal should include all dates, times and the total number of sessions to be scheduled.

In an effort to accommodate as many members of our community as possible, you may propose multiple registration periods for your class if you so desire. Example: you may choose to run your class twice, in two six week sessions. Students may register for the first session, the second session or both sessions. If you would like to select this method, please establish a minimum number of participants for each session.

Payment Processing:

All continuing education class fees will be collected by the Taconic Hills Central School District. Reimbursement for cancellation of enrollment will only be processed if the request is received prior to the start of a class, unless there are extenuating circumstances. In this case, the request must be approved by both the Taconic Hills CSD School Business Official, and the class instructor. In some cases, a credit may be issued for future use by the student.

Instructor stipends will be paid based on the 80/20 method: 80% of the tuition fees collected will be directed to the instructor, 20% of the fees collected will be directed to the school district. In addition, some courses may have separate materials fees and/or certification/license application fees.

Thank You!

Thanks in advance for submitting your proposal! If your proposal is accepted, you will receive an email to view the flyer. Please review your course description and verify that the information is correct. Changes should be directed to Ashley DuBois at (518) 325-2811 or email to adubois@taconichills.k12.ny.us

Continuing Education Course Proposal

Note: All information on pages 3-4 must be filled out completely.

Please complete and return pages 3-4 to: Continuing Education Office, Attn: Ashley DuBois, 73 County Route 11A, Craryville NY 12521. You can email your information to adubois@taconichills.k12.ny.us

Name _____

Telephone _____

Address _____

Cell Phone _____

SS# _____

Email Address: _____

Course Title: _____

Tuition Fee Per Person _____

Material Fee Per Person _____

of Sessions Per Course _____

Course Frequency _____

Suggested day(s) of the week, date(s) and time(s):

Minimum # of students required _____

Maximum # of students allowed _____

Description of Proposed Course/Class that can be used for advertising:

Building Use Agreement

It shall be the policy of the Board of Education to encourage the greatest possible use of school buildings for community-wide activities which do not otherwise conflict with school related academic and recreational programs and activities. This is meant to include informal groups as well as formally recognized civic, social and recreational organizations. Groups wishing to use the school facilities must secure written permission and abide by the rules and regulations established for such use.

Rules for Use of School Facilities and Grounds

Individual and groups requesting to use the school facilities shall be required to furnish public liability and property damage insurance in the amounts set forth below. Such insurance shall designate the school district as an additional named insured. Evidence of such coverage shall be in the form of a "Certificate of Insurance." Together with an additional insured endorsement, this is issued by an insurance company licensed to do business in the State of New York providing the coverage, and shall be in the following amounts:

Certificate of Insurance:

Taconic Hills Central School District Attention: Business Office
73 County Route 11A
Craryville, NY 12521

\$2,000,000 - Each Occurrence \$5,000,000 - General Aggregate Coverage

Do you hold general liability insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No

In the absence of proof of insurance, the following Conditions for Use and Hold Harmless Agreement must be acknowledged by Instructor/Facilitator.

Conditions for Use of Facilities and Grounds

1. Formal and informal groups may be subject to costs associated with the activity. These costs would be directly related to the activity and could include costs such as custodial services, kitchen supervision, administrative fees, utilities, and the cost of any repairs to the facility as well as repair/replacement of damaged equipment.
2. Adult supervision must keep all persons from entering any other part of the building except those designated in the permit.
3. Alcohol or drug consumption or possession on school premises is prohibited.
4. Smoking is prohibited on school property.
5. The walls shall not be disfigured or soiled. Nails are not to be driven in plaster or permanent wood trim of the building or in the floor.
6. The District retains the right to cancel the use of building permits at any time due to unforeseen/emergency situations, school related activities, or lack of proper supervision.
7. We are not responsible for any lost, missing or stolen items.

I, _____, do hereby covenant and agree to release and hold harmless the Taconic Hills Central School District from and against any liability, loss, damages, claims or actions (including costs and attorney fees) for bodily injury and/or property damage, to the extent permissible by law, arising out of or in connection with the _____ class of the Taconic Hills CSD Continuing Education Program.

I further agree to the terms and conditions outlined in the Taconic Hills CSD Conditions for Use of Facilities and Grounds.

Signature of Instructor

Print Name

Date

Administrative Use Only:

Date Received by Business Official: _____

Business Official Signature: _____

Approved ☐

Not Approved ☐

Notes:

Date Given to District Clerk for Board of Education Approval: _____

Expected Approval Date: _____