

WPRF - Course Proposal Form

1900 Aviation Drive

Waukesha, WI 53188

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Name:	
Daytime Phone:	
Email Address:	
Address (street, city, state, zip):	
Qualifications:	
Educational Degrees (include date obtained):	
Certifications (include date obtained):	
Course Topic:	
Years of Experience in Subject Matter (describe):	
Signature:	Date:

WPRF has two different types of course instructors, employees and independent contractors. As employees you will be paid an hourly wage and as an independent contractor you will be paid per participant. Wages in both instances will be negotiated with the recreation supervisor. The following document can be used to determine independent contractor eligibility: Determination of Worker Status for Purposes of Federal Employment Taxes and Income Tax Withholding **Form SS-8**, Dept. of Treasury, Internal Revenue Service at this website: <http://www.irs.gov/pub/irs-pdf/fss8.pdf>

Please Circle One: Independent Contractor OR WPRF Employee

Course Title:
Recommended Ages of Participants:
Class Description to go in Activity Guide:
Proposed Dates of Session(s):
Location of Class (please include specific address if it is not in a WPRF building):
Proposed Day of the Week:
Propose Start and End Time:
Number of Course Meetings:
Minimum/Maximum Enrollment:
Facility or Audio Visual Needs:
Fee for Supplies (per student):
Materials need from WPRF: