



Mahomet Parks & Recreation Department Independent Contractor Handbook

A Guide for Contract Instructors

Questions/Comments: 586-6025 or visit www.mahometrecreation.com

Our Philosophy and Mission

MISSION STATEMENT

The mission of Mahomet Recreation is to improve the quality of life for all participants by meeting the need of the community through the provision of safe, excellent, recreational and leisure-time activities.

SPORTSMANSHIP

We promote good sportsmanship, which is a combination of fair play, respect and consideration for opponents, spectators, teammates, coaches and officials.

HEALTHY RECREATION

Our programs are designed to provide healthy recreation and to keep winning in perspective in an environment where participants can have fun while developing their physical skills and emotional maturity levels.

RESPONSIVENESS

Mahomet Recreation regularly evaluates community needs and responds by offering programs that are desired.

EQUAL ACCESS

All citizens are encouraged to participate in our affordable programs regardless of their skill levels, gender, race, socio-economic status, or any other factor that is not in conflict with our mission.

DID YOU KNOW?

Did you know that we're a fee base program? Fee base programs do not receive tax dollars. We are a Department of the Village Administration, unlike Park Districts; we rely only upon participant fees and donations from the community. Park District fees are lower because they receive tax dollars to support and fund programs. However, we're proud that our fees are very competitive with area Park Districts!

So You Have an Idea...

The Village of Mahomet is always looking for motivated, energetic and personable contract instructors to teach classes which will enhance the quality of life in Mahomet. An instructor must possess strong skills in teaching, be positive, organized, have good communication skills, and demonstrate a desire to develop and promote their program.

Interested individuals wishing to instruct a class can complete the program proposal, Independent Contractor Agreement and W-9 at the end of this packet and send it to:

*Village of Mahomet
Parks & Recreation Department
Attn: Dan Waldinger
P.O.Box 259
Mahomet, IL 61853*

What is a Contract Instructor?

A contract instructor is considered an independent contractor of the Village of Mahomet. The instructor is under contract with the Village and is paid a percentage of the revenues generated (based upon resident rate).

Responsibilities of Contract Instructors

INSTRUCT

The instructor sets the class tone and develops the curriculum.

MATERIALS/EQUIPMENT

The instructor provides any related materials needed for the class. This should be considered when determining class fees.

STORAGE

The instructor must not store any class materials on site. All materials/equipment must be removed after each class.

SETUP

The instructor is responsible for any related set up required for the class.

CLASSROOM CONTROL

The Instructor is responsible for control of students. Please make sure that students do not unduly disturb other activities in the facility and that no damage is done to the room or equipment. If problems persist, please discuss the difficulties with the Department.

FACILITY ACCESS

In most cases, Mahomet Parks & Recreation will provide instructors with one key for the facility that is used. Contract instructors are required to return the key upon conclusion of their agreement with the Department.

INSURANCE

In some cases additional liability insurance may be required.

SAFETY

- Instructors must see that children are released to their parents or another responsible adult. **Children should not be allowed to leave the classroom unattended during the class session. Instructors are not to leave until all children are picked up.** If an emergency arises and you cannot wait any longer, you should contact the Director of Parks and Recreation.
- Instructors should never drive students in their personal vehicles.
- Instructors should not bring pets or other individuals to class.

PROGRAM QUESTIONS

- Instructors are required to provide the Department with a phone number. Any class specific questions will be directed to the instructor.

CANCELLATIONS/SICKNESS

- In cases of sickness or a cancellation, instructors are responsible for contacting their participants. In extreme circumstances the Department will assist.
- It is the responsibility of the instructor to provide a qualified substitute instructor or a make-up lesson for the students. Instructor must contact the Department to determine if space and time is available for make-up classes.
- If an instructor finds it necessary to be absent for half the sessions or more, the Department should be notified and the substitute instructor should submit an application and be interviewed so that a contract can be written for the new instructor.

Responsibilities of Mahomet Parks & Recreation Department

1. Provide adequate space.
2. Process registrations and handle all financial transactions including instructor payments.
3. Promote program (see Publicity section below for more details)

Administrative Policies and Expectations

Instructors who are under contract with the Village of Mahomet Recreation Department must adhere to the following policies:

REGISTRATION NOTES FOR CONTRACT INSTRUCTORS

- No registrations are taken in class. All registrations should be processed by the Mahomet Parks and Recreation Department. **DO NOT LET STUDENTS INTO YOUR CLASS IF THEY ARE NOT ON THE ROSTER.**
- Do not take any drop-in fees unless pre-arranged and approved by the Department.
- Class rosters will be available for instructors at the building where the class is held, for the first meeting. People who are not on the roster or do not have a registration receipt are not registered and should not be allowed in the class.
- It is the responsibility of the instructor to keep an accurate tally of those students within his/her class. It is unfair to allow students who are not registered to take the time of the instructor or the space and equipment of the class away from those who are registered and paid members.
- Any Accidents/Incidents should be reported to MPRD as soon as possible (Exhibit A)

Remember, you will not be paid for students not on your roster and you are liable for them.

REGISTRATION POLICY

Please read the information below carefully before filling out registration form:

- * Programs will be filled on a first come, first served basis.
- * All programs will have a minimum and a maximum enrollment.
- * All payments must be **PAID-IN-FULL** at time of registration.
- * **Registrations** can be made online, by mail, or in person during regular office hours. There is an afterhour's drop box by the front door of the Village of Mahomet Administrative building or the white drop box on the drive just east of the Administrative building. They are available 24/7. Place in an envelope and write: Attention Parks & Rec. (*Scholarship registrations must include a copy of their School Reduced Lunch form with the registrants name on the form and it dated with the current school year to be considered*).
- * **Mail in registrations** with registration form and full payment made out to MPRD. Mail them to: Mahomet Parks & Recreation Department, PO Box 259, Mahomet, IL 61853
- * **Online registrations** - there is a convenience fee of 2.9% + .30¢ per transaction that our web server charges.
- * In most cases, Non-residents will pay an additional fee for each program for which they register.
- * Waiting lists will be formed after a program is filled or deadline has past. There is a \$10.00 late fee assessed to those participants taken off the waiting list and have registered after the deadline date.
- * If the program is full, your check will be returned to you and you will automatically be placed on a waiting list.
- * We cannot accept telephone registrations for **ANY** Parks & Recreation activity.
- * The Park & Recreation Department works hard to schedule programs at your convenience, however, under extreme conditions reserves the right to change facilities, time, dates or instructors. We do our best to notify participants of changes in advance.
- * If a Parks & Recreation program is scheduled at a school facility, school programs have priority.
- * Programs held in school facilities will **not meet when schools are closed or cancelled**.
- * The Park & Recreation Department reserves the right to adjust any incorrect program fees that were due to printing errors.
- * A \$10.00 service charge will be assessed for any returned check and any future registrations will need to be paid in cash.
- * Attendance in our programs is limited to **registered participants only**.
- * Recreation programs are designed for specific age groups. Participants must be the age or grade designated on the registration form. Birth certificates may be requested.
- * For league programs, no outside scheduling or travel is allowed unless authorized by the Department.
- * The Village of Mahomet and the Parks & Recreation Department assumes no responsibility for personal injury or loss of personal property for anyone attending or participating in a Parks and Recreation Department sponsored event or activity.

REGISTRATION DEADLINE POLICY

Because some programs require ordering uniforms, supplies, time to organize, assign field/court space and hiring additional staff based on enrollment, Registration Deadlines have been established. A "Wait List" will be established for those that have missed the registration deadline. A registration form must be filled out and turned in, **without payment**, to be placed on a wait list. When the registration is turned in, it is date and time stamped. Players on the wait list will be used to fill team vacancies **if** and **when** they occur. Players will be taken in date order off of the wait list and a \$10.00 late fee will be assessed. There is no guarantee that a child will be accepted off the wait list. Register early to avoid disappointment.

RESIDENT/NON-RESIDENT

The Recreation Department is not supported by Village tax dollars, however the Parks do receive a very limited amount of funding from the "Village of Mahomet" tax line item on an annual basis to help develop and maintain our park and play areas. Since the families that live within our corporate limits pay a "Village of Mahomet" tax to help our parks, the Village Board decided it was only fair that those families that live out of the corporate limits or those that do not pay the tax, help with funding to maintain our Village Parks as well. The Village of Mahomet distinguishes Residency or Non-Residency by the "Village of Mahomet" tax line and has nothing to do with the school districts or the public libraries boundaries, they set their own.

We hope this helps explain how the Village determines residency.

If you have any further questions, please do not hesitate to email or call us.

CLASS MINIMUMS / MAXIMUMS

The minimum and maximum number of participants to be allowed in a class will be established by the instructor and the Director of Parks & Recreation. Consideration of the best number for instructional purposes, room size, and equipment available will be criteria for class numbers. Be careful not to set your minimum too high as class will be cancelled if minimum is not reached by the registration deadline.

PRINTING

Our Department will print class materials or flyers (within reason) for instructors if arrangements are made in advance with your Department contact person and the work load is such that it can be handled.

We do not print materials for other recreation Departments or other organizations taught by the same instructor. We will not print entire school runs for the district.

PUBLICITY

- The Department will provide a certain amount of publicity for all classes. If time allows, a listing and description will be placed in the "Annual Program Guide" brochure which is mailed to all Mahomet residents at the beginning of each calendar year
- We will include reminders and press releases in the *Mahomet Citizen*.
- In most cases, we will promote it in our bi-monthly e-newsletter distributed to nearly 2000 email addresses.
- In some cases, we will promote via school district take home flyers.
- Class listings/details will be posted on our Department website.
- We can advise or assist instructors with flyers or press releases by arrangement. All publicity must include: "Sponsored by Mahomet Parks & Recreation Department" and our website for registration: www.mahometrecreation.com.

Additional publicity done by the instructor is advisable for the success of the class, but must be approved by the Department.

EVALUATIONS

MPRD will provide Instructors with program evaluations upon the conclusion of the last class. The evaluation is included in this packet under Exhibit B.

INSTRUCTOR PAYMENT

- Instructors receive a percentage of the fees paid by students registering for their classes. All registration moneys are collected and deposited by the Department.
- The payment process will begin after receipt of services, so advance payments are not possible.
- Approximately two weeks before the conclusion of the last class taught, for each individual session, the payment process will be started. The instructor will receive a check for class(es) taught from the Village of Mahomet by the time the class ends or within 4 weeks after the last class concludes.

CLASS TIMES

Once a class has begun, it may not be cancelled. This should not be changed by the instructor without approval of the Department.

REFUNDS

Never promise a student they can get their money back or make-up missed classes. Please refer all refund inquiries to the Department. In most contract classes refunds will not be available.

REFUNDS POLICY

A refund application form must be filled out and submitted to the Mahomet Parks & Recreation Department office in order to receive consideration for a refund. Forms can be downloaded from our website.

* We cannot accept telephone Refund Application Requests for **ANY** Parks & Recreation activity. All requests must be made by mail or in person during regular office hours.

* **NO** refunds on "league" programs once teams are set up and posted on our website.

* **NO** refunds will be given after the start of the program.

* **NO** refunds for certain special events. (i.e.; recreation trips, etc.)

All refunds are subject to a \$10 Administrative Service Fee (per registration) except under the following circumstances:

* Refund is initiated by the Park & Recreation Department

* Doctor's note is submitted with Refund Application Form prior to the start of the program

The Village of Mahomet Parks & Recreation Department Director reviews all refund applications. Refunds will be submitted to the Village Board for approval. The Village Board meets on the fourth Tuesday of every month. Approved refunds will be mailed the next business day. Please allow 6 to 8 weeks for the refund application to be processed.

CHANGE OF ADDRESS

If there is a change of your address and/or phone number, please notify us as soon as possible. Any delay may subsequently delay your payment.



Mahomet parks & Recreation Department Program Proposal Form

Thank you for your interest in offering your program here with the Mahomet Parks and Recreation Department. We are always striving to provide worthwhile community programs and activities. In order to allow us to better understand and market your proposal fill out the following information.

Program Title: _____

Program Description: _____

Program Goals & Objectives: _____

Location Desired: _____

Targeted Age Group: _____

Duration of Program: (Days) _____

Duration of Program: (Weeks) _____

Dates: _____

Times: _____

Minimum Participants: _____

Maximum Participants: _____

Suggested Fee for Residents: \$ _____

Registration Deadline: *(always set on a Tuesday)* _____

Amount of Prep Time You will Need: _____

Amount of Clean up Time You will Need: _____

Notes: _____

For Office Use Only

Fee: _____

Instructor Rate: _____

Expenses: _____

Expected Profit: (30%) _____



Village of Mahomet Parks & Recreation

INDEPENDENT CONTRACTOR AGREEMENT

Please Print Legibly

Today's Date Applying for: League/Position Birth Date MM/DD/YY Circle: Male Female

Full Name (First, Middle, Last) Maiden List & Attach Any Certifications

Home Address Home Phone Cell Phone

City State Zip Code Mailing Address for Pay Check

Drivers License # Email Address (print clearly) S M L XL XXL XXXL
T-Shirt Size (Circle 1)

.....
EMERGENCY CONTACT INFORMATION:

Name Home Phone

Relationship Cell or Work Phone **Cell Work**

Physician's Name Phone

Circle Hospital Preference: **Carle** **Provena**

I give my permission to the Mahomet Police Department, Mahomet, Illinois or it's agent to check criminal history files of Champaign County, Illinois, and /or other Law Enforcement agencies that are deemed necessary, and obtain any information contained in those files regarding me. I give my permission to other Law Enforcement agencies to release to the Mahomet Police Department information contained in their files regarding me. I recognize the right of the Mahomet Police Department to consider, at its discretion, the information located in those files. I recognize that certain sources of information are confidential and that Mahomet Police Department has the right to withhold from me such confidential sources and information obtained there from.

I agree to be a recreation instructor/official for the Village of Mahomet. I understand that I will receive a 1099 form if I earn over \$600.00 for the year. I authorize the Village of Mahomet to mail my paycheck to the above address.

Independent Contractor Signature Date

Director's Signature Date

.....
Mahomet Police Department Use Only

Police Department Signature Date _____ Approved _____ Disapproved Mahomet

Independent Contractor Agreement

INDEPENDENT CONTRACTOR: It is understood that the Instructor is acting as an independent contractor and not an agent or employee of the Village of Mahomet and is therefore not eligible to lay claim to benefits from retirement, Social Security, State Unemployment Insurance, Workers Compensation, or to those benefits reserved for employees of the Village. The Instructor shall be responsible for Paying his/her own medical bills for any personal illness or injuries occurring during the term of this contract.

SUPPLIES: The Instructor is responsible for obtaining and supplying all materials, supplies and equipment necessary to provide the service.

Storage of personal property at any Mahomet Parks and Recreation Facility is prohibited.

ACCIDENT/INCIDENT REPORTING: The Instructor shall notify Mahomet Parks and Recreation at the earliest possible time of any accidents to any person or property that occur during the class, and shall submit to the Village in writing the Village provided Accident/Incident Report Form as soon as feasibly possible.

SERVICES PROVIDED: The Instructor agrees to provide all necessary labor to perform the following services for the Mahomet Parks and Recreation Department:

Type of Instruction Offered: _____

Enrollment: Minimum _____ Maximum _____

The size of each class may vary. Class maximums will be established by Mahomet Parks and Recreation Department. Instructor agrees to registration policy set forth by Mahomet Parks and Recreation. Participants must register through Mahomet Parks and Recreation on or before the established deadlines.

TERMS: The terms of this agreement shall commence on the _____ day of _____, through the _____ day of _____, covering the _____ session.

This contract may be cancelled by Mahomet Parks and Recreation only in the event that there is insufficient registration to satisfy the expense of operating class, failure of instructor to adhere to department registration policies, substandard services; or if sufficient space has not been reserved to accommodate the program.

The contractor will be paid only for that part of the contract that he/she fulfills. If the class, program or event does not take place because of the Independent Contractor's illness, or because of a holiday, it is to be made up at a time selected by the Independent Contractor and approved by the Parks and Recreation Director or his/her designee.

COMPENSATION: Mahomet Parks and Recreation agrees to pay the Instructor _____% of the resident rate of the registration fees received. The Mahomet Parks and Recreation Department will retain additional revenues, including any possible non-resident and late registration fees. Payment shall be issued after the conclusion of the program, and mailed the fourth Wednesday of the month. Payment is for professional services and not an hourly wage.

HOLD HARMLESS: The Instructor agrees to hold harmless, defend and indemnify the Village of Mahomet, its officers, employees, from and against any and all liability, claims, demands, losses and actions for injury to and/or death of person damage to property arising out of or incurred in connection with Instructors performance of this contract.

REPORTING OF INCOME: It shall be the responsibility of the Instructor to properly report all monies earned as a result of work done for the Village of Mahomet to the State and Federal Governments.

Mahomet Parks & Recreation Director Signature

Independent Contractor Signature

Date

Date

Request for Taxpayer Identification Number and Certification

Give form to the
 requester. Do not
 send to the IRS.

Print or type
 See Specific Instructions on page 2.

Name (as shown on your income tax return)	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶ <input type="checkbox"/> Exempt payee <input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
City, state, and ZIP code	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number
OR
Employer identification number

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here

Signature of
 U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

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Village of Mahomet

Parks & Recreation

503 E. Main Street - P.O. Box 259 - Mahomet, IL 61853-0259
Village Administration (217) 586-4456 Fax (217) 586-5696
Park & Recreation Office (217) 586-6025

ACCIDENT/INCIDENT REPORT FORM

Print Legibly

Date: _____ Time: _____ AM/PM Day: S M T W T F S
Name: _____ Age: _____ Sex: M F Height: _____
Address: _____
Phone: _____ Parent's Name (if under 18) _____

Facility where it Occurred: _____

Exact Location within the Facility: _____

Non-Employee/Non-Rescuer Witnesses:

- 1. Name: _____ Phone: _____
- 2. Name: _____ Phone: _____

<u>Nature of Injury (check all that apply)</u>	<u>Part of Body Injured</u>
<input type="checkbox"/> Abrasion (scratch)	<input type="checkbox"/> Ankle
<input type="checkbox"/> Allergy Related	<input type="checkbox"/> Arm
<input type="checkbox"/> Amputation	<input type="checkbox"/> Back
<input type="checkbox"/> Avulsion (tearing separation)	<input type="checkbox"/> Cheek
<input type="checkbox"/> Burn	<input type="checkbox"/> Chest
<input type="checkbox"/> Cold Related	<input type="checkbox"/> Chin
<input type="checkbox"/> Concussion	<input type="checkbox"/> Ear
<input type="checkbox"/> Contusion (bruise)	<input type="checkbox"/> Elbow
<input type="checkbox"/> Fracture	<input type="checkbox"/> Eye
<input type="checkbox"/> Heat Related	<input type="checkbox"/> Face
<input type="checkbox"/> Laceration	<input type="checkbox"/> Finger/Thumb
<input type="checkbox"/> Previously Existed	<input type="checkbox"/> Foot
<input type="checkbox"/> Puncture	<input type="checkbox"/> Hand
<input type="checkbox"/> Respiratory	<input type="checkbox"/> Head
<input type="checkbox"/> Sprain	<input type="checkbox"/> Knee
<input type="checkbox"/> Strain	<input type="checkbox"/> Leg
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Mouth
	<input type="checkbox"/> Neck
	<input type="checkbox"/> Nose
	<input type="checkbox"/> Shoulder
	<input type="checkbox"/> Thigh
	<input type="checkbox"/> Toe
	<input type="checkbox"/> Wrist

Injured Person: (Circle one) Athlete Coach Volunteer Spectator Referee

Exact location of injury (Left/right, front/back, etc.): _____

Description of Accident or Incident:

(How/why did it happen? What was the patron doing? List contributing factors, tools or acts that may have been seen as unsafe.)

(Over)

Extent of Injury: ___ Mild ___ Moderate ___ Serious

Immediate Action Taken:

First Aid Treatment Provided: _____
Given By: _____

Blood Present? Yes No Gloves Worn? Yes No

AED Used? Yes No By Whom: _____ # of Defibrillations: _____

Sent Home? Yes No By Whom: _____

Taken to Hospital? Yes No By Whom: _____

Responding Emergency Vehicle (circle all that apply): Ambulance Fire Police

Sent to which hospital? _____

Police Report Filed? Yes No Police Officers name: _____

Parents Present? Yes No If no, were they notified? Yes No

How were they notified? _____ By Whom: _____

Was Supervisor notified? Yes No If yes, by Whom: _____

Name of Supervisor that was notified: _____

Person in Charge of Facility at Time (Name & Position): _____

Signatures: Person who prepared this form: _____ Date: _____

Supervisor: _____ Date: _____

Parks & Rec. Director: _____ Date: _____

**This form MUST be brought into the Parks & Recreation office within
24 hours after accident/incident!**

Dropped it off in the 24 hour drop box after hours or at the Parks & Recreation Office.

For Office Use Only:

Human Resources Notified: Yes No By Whom:

Action Taken:

Time: AM PM Date:

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Mahomet Parks & Recreation

PO Box 259 - Mahomet, IL 61853 - (217) 586-6025 - fax (217) 586-5696



Instructional Course Evaluation

First & Last Name: _____ Date: _____

Participant's Name(s): _____

Phone Home: (Optional) _____ Email: (Optional) _____

We appreciate you taking the time to fill out the following evaluation. Your assistance in evaluating these types of programs and services help us to improve our course selections. We thank you for your time, suggestions and participation!

1) Course Name: _____

2) How would you rate the overall quality of this course? Excellent Good Fair Poor Undecided

3) Overall, how would you rate the instructor? Excellent Good Fair Poor Undecided

Please tell us how much you agree or disagree with the following statements.

4) The instructor is well prepared for class sessions.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

5) The instructor answers questions carefully and completely.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

6) The instructor uses examples to make the materials easy to understand.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

7) The instructor made the course material interesting.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

8) The instructor is knowledgeable about the topics presented in the course.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

9) The instructor treats students respectfully.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

10) The instructor is fair in dealing with students.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

11) The instructor makes students feel comfortable about asking questions.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

12) I would recommend this course to others.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

13) Overall, I was satisfied with this class.

- | | |
|---|--|
| <input type="checkbox"/> Strongly Agree | <input type="checkbox"/> Strongly Disagree |
| <input type="checkbox"/> Agree | <input type="checkbox"/> Undecided |
| <input type="checkbox"/> Disagree | <input type="checkbox"/> N/A |

14) Please tell us what you liked or disliked about this course.

15) Please tell us how you found out about this course. (Please circle all that apply)

- | | | | |
|---------------------|-------------------|----------------|------------|
| Mahomet Citizen | Park & Rec Office | Village Office | Website |
| Family/Friend | Program Guide | Reminder Card | MPRD Email |
| Flier – From where? | _____ | Other: | _____ |

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