



Community Education

Lil' Explorers | Preschool & Pre-K | Kids Express
Sports & Enrichment | Summer Academy | Facility Rentals

Chandler Unified School District

CUSD Camps/Clinics/Tournaments (CCT)

www.CUSDcommunity.com

480-224-3900

This document is intended to guide individuals who enhance opportunities for our students and programs through fee-based clinics and/or camps that take place on CUSD and Off-site Facilities. We believe it is important that we adhere to consistent district-wide procedures and that we offer fair compensation for staff and reasonable fees for participants. As a T-3 facility user,

_____ agrees that 100% of revenue over cost of running _____

Name of Coach

Name of Camp/Clinic

program will directly benefit CUSD students. It is also understood that the following procedures are to be followed:

- All fundraising activities must be submitted through the Director of Secondary Education.
- All camp/clinic paperwork and contract must be submitted to Community Education 10 business days prior to event.
- All marketing materials **MAY** be distributed after written/verbal approval by Community Education Department.
- Community Education Department will notify of approval and materials may distributed.
- **No fees** are to be collected at sites. All fees and online registration will be handled through Community Education.
- Community Education will assist coaches with gaining access to in-District camp/clinic rosters.
- Timesheets for certified and non-certified staff must be submitted for all that that worked the event. (Exception for Camps & Clinics: Free camps or coaches opt not to be paid.) Stipend is based upon the following formula:

Coordinator/Head Coach

HOURS X # OF DAYS = TOTAL HOURS X \$30.00 = STIPEND

Assistant Coaches/Teachers

HOURS X # OF DAYS = TOTAL HOURS X \$26.00 = STIPEND

- **Approval signatures required:**
 1. Site Athletic Director/Administrator (AIA Compliance/Site Availability/Cleared Coach)
 2. District Secondary Director/Administrator (AIA Compliance)
 3. Community Education Sports and Enrichment Specialist
- **Purchase Order procedures:**

Consult with your administrative assistant, bookstore manager or purchasing department for assistance regarding the Purchase Order process. Failure to follow the District's procedure will result in privileges being denied.
- 20% of total salaries will be configured to cover **State & Federal** adjustments and benefits.
- A Community Education/Civic fee of 5% of **Gross Revenue** will be applied. (Facilities rental will be included.)
- All materials and supplies will follow State and District procurement procedures.
- All concession sales must follow USFR and Cash Collection Forms must be completed.
- Health and safety guidelines allowing ample water breaks (20 minute intervals) will be followed.
- All Chandler Unified School District and/or AIA policies and procedures will be followed.
- Supervision of all students will be available until parent/guardian or designee has picked up every student.
- Revenue will be deposited into the account listed on forms.

* See the T-3 Facility Use Worksheet on page 2 to assist in calculating costs and participation fees.

Return completed contract and worksheet to Community Education.



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Name of Camp/Clinic/Tournament: _____

Site 1: _____ Specific area/room: _____

Site 2: _____ Specific area/room: _____

Date of Camp/Clinic: _____ Total # Days: _____ Total # Hours: _____

Estimated # Students: _____ Fee per student: _____ Total Fees: \$ 0.00

Name	Employee ID Number (IFAS)	Camp Hours per day	Number of Days	Hourly Rate of Pay	Total Payment
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
					\$ 0.00
If employee is <i>New Hire</i> , ePar MUST be sent to HR for pre-approval prior to start or employee will not be paid .				Total Salaries:	\$ 0.00
				Benefits Adj. (20%):	\$ 0.00
				TOTAL PAYROLL:	\$ 0.00

NOTES:

- **MUST** be CUSD employees.
- If income levels are not reached, stipend amounts **will be lowered**.
- **Call Community Education if registration exceeds estimated number of students.**

Complete only if Community Education needs to pay vendor and/or consultant must have quotes attached to the packet:

Consultant or Vendor	Approved (Y/N)	Stipend Rate	Total
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
			\$ 0.00
		TOTAL:	\$ 0.00

Total Salaries:	(Line 1)	\$ 0.00
5% Community Ed/Civic Fee:	(Line 2)	\$ 0.00
Total Cost of Camp/Clinic (lines 1 and 2)	(Line 3)	\$ 0.00
Amount to be deposited into AUX account: Parentheses means deficit. (NOT allowed.)	(Line 4)	\$ 0.00

- ☐ Completed worksheet due to Community Education Department 10 days prior to event.
- ☐ Any adjustments will be communicated with Community Education prior to completion of event.
- ☐ Addition to payroll must be submitted to Community Education prior to the end of the camp/clinic.
- ☐ I have reviewed and completed the T-3 Facility Use Worksheet to the best of my ability.



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Name of Camp/Clinic/Tournament: _____

Coach's Name: _____ Regular Job Title: _____

Coach's Work #: _____ Coach's Cell #: _____

Coach's Email Address: _____

EVENT INFORMATION

Dates	List Day(s) of the Week	Time(s) Requested MUST include setup / cleanup	School Name	Specific Space (room, field)	Age Group or Grade (start and end)	Max # Of Participants

Chandler High School POOL/Courts Request Information (only):

Dates	List Day(s) of the Week	Time(s) Requested MUST include setup / cleanup	# of Lanes/courts	Which Lanes/Courts	Age Group or Grade (start and end)	Max # Of Participants

REVENUE OVER COST WILL BE DEPOSITED INTO WHAT FUND?

525 – Auxiliary Auxiliary Budget Code: _____

Coach's Signature: _____

Varsity Field Use Approval (Tom Dunn's Signature)/Approval email attached: _____

Site AD or Administrator's Signature _____ Print Name _____ Date _____

District Secondary Director's Signature _____ Print Name _____ Date _____

Community Education Signature _____ Print Name _____ Date _____

Camp/Clinic Sponsor Signature (I have read and agree to follow the terms and conditions indicated on the contract.) _____