



Art Class/Workshop Proposal

Thank you for your interest in teaching a class at the Glacier Art Museum (formerly Hockaday Museum of Art). Our goal is to encourage creativity, artistic expression, and appreciation of the arts through educational experiences that encompass a variety of art styles and media. Proposals from instructors are reviewed and approved by our education committee. To be considered, your proposal must be received no less than eight weeks prior to your proposed start date for the class. Community needs and interests, time, site availability, price, instructor teaching experience and quality of body of work are considered during the review process.

INSTRUCTOR NAME: First _____ Last _____

CONTACT INFORMATION:

Mailing address

Street/PO: _____ City: _____ State: _____

Zip code _____

Phone number _____

Email _____

ARTIST BIO: (A paragraph that tells students about you, providing credentials or experience)

PHOTO FOR ARTIST BIO (your art or you with your art)

_____ attached to email —1 MB (approx. size), jpeg, color, 300 dpi

WEBSITE: (provide address if you have one) _____

TITLE OF CLASS/WORKSHOP: _____

DESCRIPTION: (1–2 paragraph maximum) This description should focus on the content of the class and help answer questions from potential students. Be brief and concise, explain what the student will learn and make.

SHORT DESCRIPTION: Provide a one or two sentence description for the class listing. Shorter and snappier than the full description but can use the same wording/language.

CLASS PROJECT PHOTO(S):

___ attached to email —1 MB (approx. size), jpeg, color, 300 dpi

CLASS OR WORKSHOP LOCATION:

___ Museum classroom **OR** _____ proposed off site location

CLASS FORMAT: ___ in person ___ online ___ hybrid of online and in person

AGE RANGE OF STUDENTS: ___ Family ___ Kids ___ Teens ___ Teens/Adults ___ Adults
specific age range if applicable _____

SKILL LEVEL: ___ Beginner ___ Intermediate ___ Advanced ___ All Levels

NUMBER OF STUDENTS: ___ Minimum ___ Maximum

(classroom capacity for most classes is 15, but may be less depending upon room arrangement)

CLASS SESSIONS: _____ number of sessions _____ number of hours per session

TIMES: _____ preferred start time for session _____ end time

PROPOSED DATES: _____

SUPPLIES:

List all materials you require to teach this class and in what quantities. Include everything you will need, even things we might have on hand like scissors, markers, etc. Also include cost estimates for any supplies that you would need to purchase and be reimbursed for.

If applicable:

Student Supply List - include all materials students are expected to bring
_____ attached to email

\$_____ supply fee charged per student to be paid to instructor for materials supplied.

List materials you are providing: _____

ROOM SET UP REQUIREMENTS:

A/V REQUIREMENTS:

PROPOSED CLASS/WORKSHOP FEE: (this is what student pays) \$ _____

EXPECTED COMPENSATION OR PAYMENT ARRANGEMENT:

_____ flat fee (regardless of the number of students)

Amount range \$ _____ to \$ _____

_____ hourly rate (regardless of the number of students)

Amount range \$ _____ to \$ _____

_____ a percentage of each student fee (this option is only available for workshops)

HOW DO YOU PLAN TO MARKET THIS CLASS?

NOTES: (any additional requirements or information)

Contact the Glacier Art Museum Education Department with any questions related to teaching classes at 406-755-5268 or education@glacierartmuseum.org

Proposals should be emailed to education@glacierartmuseum.org