



INSTRUCTOR APPLICATION

Name: _____ Date: _____

Email: _____ Phone: _____

Are You a New Leaf Employee? Yes No

Educational Background:

Area of Focus: _____

Certifications: _____

Do you have liability insurance? Yes No

Are you familiar with natural foods:

Yes No—please explain:

Have you taught classes before?

Yes No—if so, where?

Which category does your class fall under?

Wellness Lecture Demo Hands-on Cooking Class Store Tour Fitness

Educational/Nutrition Lecture Other—please explain:

List class topics you are interested in teaching:

Do you have the following (check all that apply) promotional outlets?

Website E-newsletter Facebook (business/ personal) Twitter Instagram

LinkedIn (business/personal) Other outlets—please explain:

Preferred Store(s) for Class:

(stores listed with * have classroom space separate than store)

Westside Santa Cruz* Downtown Santa Cruz

Capitola Half Moon Bay* Pleasanton

Please submit the following with your application:

Cover letter (including details about how you would promote your class)

Photo

Resume

Brief description of suggested class

Copies of recipes or materials for class (if applicable)

Copy of certifications

Copy of liability insurance

CPR/First Aid Certification

References