

**SUBMITTER'S INFORMATION**

Name:		Email:	
Phone:		Address:	
Affiliation (if any):			

**PROPOSED MEETING INFORMATION**

*Please provide an estimate of how you envision the logistics of the course meetings.*

No. of Weeks:		Day(s) of Week:		Hours per Session:	
Time of Day:		Dates:		Max No. of Students:	
Location:					

**PROPOSED COURSE INFORMATION, TO INCLUDE ANY NEEDED SUPPLIES:**

*Feel free to answer the following questions on another sheet.*

Proposed Title:	
Course Description:	
Course Objective (What will the students learn by the end of the course?):	
Course Audience (What type of students do you hope to attract?):	
Give Us a Brief background that explains why you would be qualified to teach this course:	
List of supplies: Please include an instructor and participant supplies need and a cost estimate of each.	

**REFERENCE**

Name:		Phone:		Email:	
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Once complete, forms should be returned to Kristi Pereira, Coordinator of Community Programs.