

# Course Proposal

Please fill out completely and return to the Adult and Community Education office via mail, fax or e-mail: [choatet@lisd.net](mailto:choatet@lisd.net).

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Proposed Course Title:** \_\_\_\_\_

**Course Description (topics, activities, etc.):** *Use additional sheets if necessary.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How many times will the class meet?** *Please circle and fill in the blanks.*

One time for \_\_\_\_\_ hours                      \_\_\_\_\_ times for \_\_\_\_\_ hours each session

**When do you prefer to teach the class?** *Please circle all preferences.*

Weekdays                      Weeknights (No Fridays)                      Saturdays (first Saturday of the month only)

**What is the class capacity?** \_\_\_\_\_ Minimum enrollment                      \_\_\_\_\_ Maximum enrollment

**Who will be most interested in this class?** *Please circle all that apply.*

Children (ages: \_\_\_\_\_)                      Teens                      Adults                      Seniors  
Male                      Female

**Any room requirements** (i.e. open space, gym, whiteboard, etc.)?  
\_\_\_\_\_  
\_\_\_\_\_

**Audiovisual requirements?** *Please circle all that apply.*                      Overhead projector                      TV/VCR

## Course Proposal continued...

What materials will you be providing to the student? *(Handouts, etc.)*

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What materials will the student need to bring to the class?

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Where can the student get these materials? \_\_\_\_\_

What is the approximate cost for these materials? \_\_\_\_\_

### Instructor Compensation

LISD Community Education welcomes those who wish to donate their time as a service to the community. However, we can include the pay rate of the instructor in the course fee. How do you want to be paid?

\$ \_\_\_\_\_ per hour

\$ \_\_\_\_\_ per student

\_\_\_\_\_ Waive fee

*\*\*Please note that we attempt to offer our classes at the lowest possible price as a service to our community. Instructor compensation is one of the factors considered when we determine whether to offer a class.*

Qualifications to Teach *(Training, work experience, etc.)*

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Do you plan to offer this course through any other organization? If so, where and when? *(I.e. YMCA, Parks and Rec, etc.)*

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***Thank you for your interest in teaching for Community Ed! Your proposal will be reviewed by our staff. If the course is determined to meet the needs of the community, you will be contacted within two weeks. Please feel free to call or e-mail if you have any questions.***

### OFFICE USE ONLY

Received: \_\_\_\_\_

Follow up: \_\_\_\_\_

Interview: \_\_\_\_\_

Dates of class: \_\_\_\_\_

Time: \_\_\_\_\_