

Course Proposal Form

The Lifelong Learning Institute

Course Title

Course Description

Dates

Date Proposal
Submitted:

Fall Spring Summer

Semester:

Facilitator / Co-Facilitator

Facilitator
Name:

Email:

Phone:

Co-Facil
Name:

Email:

Phone:

Outside Speaker / Presenter

Name of Speaker / Presenter

Amount of Honorarium:

Textbook

Title:

Author:

Is the Book Optional?

Scheduling Requests

Location 1:

Location 2:

Preferred times to schedule the course
(Available times depend on location)

M T W Th F

AM:

PM:

Number of
Weeks:

Hours per
Week:

Unavailable Dates & Other Scheduling Requests

Number of Participants

Minimum:

Maximum:

Course Proposal Form

The Lifelong Learning Institute

Required Support Services

White Board

Flip Chart

Portable Microphone

LCD Projector

Wi-Fi

Screen

Remote

FLEX Room for LLI
Hybrid Course

Other (describe in Additional
Information field below)

Room Configuration

Classroom

U-Shape

Square / Rectangle

Lecture Style

Tables

Additional Information