

A World of Cultures
United in Learning



Office use only:
Session _____
Date _____

Ohlone College Community Education
39399 Cherry Street, Newark, CA 94539
Phone: 510-742-2303, Fax: 510-742-2332

Proposal to Teach NEW Class/Workshop (Not-for-Credit)

Proposed Title: _____

Instructor Name: _____

Mailing Address: _____

Home Phone: _____ Work Phone: _____ Fax #: _____

E-mail address: _____

Description: **Describe the proposed class/workshop**, as you would have it appear in the Community Education schedule of classes. Total number of words 60 to 120 max.
(We reserve the right to edit as needed.)

What will student learn:

Proposed length of class: _____ sessions of hours _____ each.

Days of week preferred: 1st choice: _____ 2nd choice: _____

Proposed time: Start: _____ End: _____

Suggested dates: 1st choice: _____ 2nd choice: _____

Number of students preferred: _____ Maximum class size: _____

Please attach a simple class outline. Include what will be covered in each session and the method of instruction (lecture, demonstration, class participation, field trip, guest presenters, hands-on activities, etc.). Specify which sessions need different audiovisual equipment. **Proposal will not be considered without this outline.**

Copy Service: Yes No
If yes, how many sheets per student? _____

Audiovisual equipment required: Yes No
Please specify: _____

Will you charge a material fee? Yes No
If so, how much? \$ _____

Will students need to purchase books or supplies? Yes No
If yes, please list and give estimate of cost and where supplies may be purchased. \$ _____,

Room/Facility request/ requirements: _____

Hourly salary for presenter varies. Salary expected per hour. _____ If the enrollment falls below the minimum number (determined by Community Education), you will be given the option to teach at a reduced rate. Would you be willing to do this? Yes No

Have you taught a similar class before? Yes No
If so, where? _____

What efforts will you be making to market your class? _____

Would you like us to develop a flyer for you to distribute? Yes No

Please describe your qualification, background, education, and/or experience relative to teaching this class. Attach resume if desired.

Thank you for your interest in the Ohlone College Community Education program. If we wish to consider your proposal, we will call you to discuss dates and details. If we feel the proposal does not meet our current needs, you will receive notice by e-mail and / or mail.

Community Education reserves the right to cancel any class at any time. If a class is canceled prior to the start date instructors will not receive compensation.

Please email us at commed@ohlone.edu or call 510-742-2303 if you have questions regarding our program.