

# Roseville Area Schools Community Education

## Adult Enrichment Course Proposal

1910 County Road B West

Roseville, MN 55113

(651) 604-3770

Please complete all items on this form and return it to the address listed above. Use a separate form for each class you propose to teach.

Please note: This proposal is not a confirmation of your current class.

All scheduled classes are at the discretion of the class scheduler. A submitted proposal is NOT an approved class.

Confirmations/Contracts of selected classes will be emailed 1-2 weeks prior to brochure printing.

### Instructor Info

**Instructor/Contact Name**

**Mailing Address**

**Organization Name**

**Social Security #**

**Phone: Home**

**Work**

**Mobile**

**Fax: Home**

**Work**

**E-mail Address**

### Class Details

**Course Title**

**Course Description** *In 50 words or less please write the description as you would like to see it printed in our catalog. Be specific and be sure to include at least 3 benefits for students taking the course.*

**Dates**

**Time**

**Total # of Sessions**

**Preferred Location**

**Maximum # of Students**

**Participant Material Cost \$**

**Collected by Instructor**

**or Include in Cost of Class**

**Materials and equipment to be supplied by the Student**

**Instructor Compensation:** *Please let us know how you would like to be paid. Check one.*

Per hour – Hourly wage based upon participant contact hours – my hourly wage is: \$\_\_\_\_\_

Per class – Stipend for the entire offering – I would like to receive \$\_\_\_\_\_ for the entire class

Per student – Fee/participant – I would like to receive \$\_\_\_\_\_ per student enrolled in class

Percentage of fees collected – I would like to receive \_\_\_\_\_% of the class fee. I recommend the class cost \$\_\_\_\_\_

I am volunteering my time and not charging for my services

## Special/Specific Needs

### Room Set-up

#### Audio/Visual Equipment Needed:

*(We do not have LCD & slide projectors available)*

**# of Photocopies Needed** *we will do them for you, but need the originals one week prior to the first class date*

**One Sentence Biography** *In 35 words or less please write a biography of yourself that highlights the experience you bring to the proposed class.*

*\*If you supply us with a photo we may use it in the brochure and highlight you and your class.*

## Course Objective

*What is the student expected to know or be able to do at the end of the course?*

## Method of Instruction

*Such as simulations, role playing, lecture, group discussion, etc*

### 3 Easy Ways to Submit Your Course Proposal:

1. Type your entries into the form, save it, & email it to: [cynthia.arneson@isd623.org](mailto:cynthia.arneson@isd623.org)
2. Print the form, fill it out, and mail it to the address listed on the first page
3. Print the form, fill it out, and fax it to (651) 604-3501