



# Adult and Community Education

School District of the City of St. Charles

*Your Link to Lifelong Learning*

## NEW COURSE Proposal Form

Please complete and return:

E-mail: [adulthoodeducation@stcharlessd.org](mailto:adulthoodeducation@stcharlessd.org) / Fax: 636-443-4044 / mail to: 2400 Zumbuhl Road, St. Charles, MO 63301

Date of proposal:  Check the semester:  Fall  Winter  Spring  Summer

Name:  Home Phone:

Email Address:  Work Phone:

Mailing Address:  Cell Phone:

City:  State:  Zip:

Publish contact information for student use?  Email  Home Phone  Cell Phone  Both  None

TITLE OF COURSE:

Number of times you would like to offer the course:

Contact Hours:  Number of Sessions:  Duration (in weeks):

I'm flexible: please choose a date for me.

1 Start Date:  Day:  End Date:  Day:  Start Time:  End Time:

2 Start Date:  Day:  End Date:  Day:  Start Time:  End Time:

3 Start Date:  Day:  End Date:  Day:  Start Time:  End Time:

Maximum Number of Students:

Target Audience: (check all that apply)

Adults  55 and Older  Pre-school  Elementary  Middle School  High School

Please check the appropriate box for course materials and provide the requested information for each.

Book Title:  Author:  Cost:

Handouts (Please include a copy of handouts with this proposal)

Supplies Cost/Student: \$

Please provide a list of all supplies needed (Attach an additional sheet if needed).

Multimedia and Classroom needs: Check all that apply:

TV/DVD  Overhead Projector  "Smart Board"  Data Projector  Laptop  Other (please explain)

Other: classroom setup:

Course Description to be used in brochure and online (maximum 40 words):

Describe the skills, abilities and knowledge the student will gain by taking this class:

Please provide an outline describing the learning activities for each class session. (Attach an additional sheet if needed.)

Please provide a brief instructor biography describing your educational background, training, talents and/or years of practicing in your area of expertise that qualifies you to teach this course. This is required as an instructor. (Attach an additional sheet if needed.)

Are you currently teaching this course in the St. Charles area?  Yes  No

If yes, where?

For more information, contact: Stephanie Collins, Program Supervisor / [scollins@stcharlessd.org](mailto:scollins@stcharlessd.org) / 636-443-4018