



Community Education Fee-Based Course Proposal

Course Information

Office Use Only: Account No.: _____

Term: _____

Course/Class No.: _____ / _____

Course Title: _____

New?: Y or N If new, attach a course description, an explanation of its marketability and a brief biography.

Part of a Series?: Y or N If Series, Name: _____

Start Date: _____ End Date: _____

No. of Weeks: _____ No. of Meetings: _____

List any dates class is not in session (Holidays/Other): _____

Schedule (Friday evenings and weekends are best for room availability.):

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Start Time (Circle AM or PM)	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM
End Time (Circle AM or PM)	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM	AM PM

Preferred Location (Special classroom setup needed): _____

Tuition Fee + Service Fee \$2.00: Per Course: _____ Per Series: _____

Multiple Registration Discount Fee + Service Fee \$2.00 (If applicable): _____

Material Fee (Collected in class): _____ **List materials provided:** _____

If applicable: Minimum Age: _____ Maximum Age: _____

Minimum Enrollment: _____ **Maximum Enrollment:** _____

Payment Information

Instructor Name: _____

Payable to (if different): _____

Are you related to any employee of the College? Yes No

If yes, name & relationship: _____

Are you currently an employee of the College? Yes No If yes, provide your Banner ID #A _____

Payment: **40% per registrant** Other: _____

Street Address: _____

City, State Zip: _____

Home Telephone: _____

Business Telephone: (_ _) _ _ - _ _ _ _ Cell Phone: (_ _) _ _ - _ _ _ _ **Make Public? Y or N**

Email Address: _____ **Make Public? Y or N**