



COURSE PROPOSAL

Instructions:

Complete form and submit to the OLLI Office by e-mail or US mail

E-mail address: olli@uark.edu

Address: 1 East Center St., Ste. 230, Fayetteville AR 72701 (or place in campus mail to ECEN230)

COURSE INFORMATION / DETAILS (*most of our classes are based on a minimum number of participants (12) but if reasons are valid for a smaller minimum requirement, please let us know.*)

| | | | |
|---|--|--|----|
| Class Title (Please keep as short as possible) | | Minimum Enrollment | 12 |
| Proposed Dates | | Maximum Enrollment | |
| Proposed Day | Mon ___ Tues ___ Wed ___ Thur ___ Fri ___ | | |
| Times Available to Teach (check begin times). Sessions are normally 2 hours in length. | 9:30 ___ 10:00 ___ 11:00 ___ 11:30 ___ 1:00 ___ 1:30 ___ 2:00 ___ 2:30 ___ | Location Preference: Fayetteville _____ Schmeiding/Springdale _____ Other Offsite Location (please list) _____ | |
| Fayetteville Locations: | UPTE campus (by Panera Bread and the Mall) ___ Drake Airfield ___ Rolling Hills Baptist Church ___ | | |
| How many sessions do you want to teach?: 1___ 2___ 3___ 4___ 5___ Other ___ (Please list #) | | | |
| Class / Activity Description: Briefly describe the class, including what makes it unique. (<i>What will they learn / gain from taking class? What are the benefits for taking class with OLLI opposed to doing on their own.</i>) This will be used by OLLI as a rough draft for the catalog and should be aimed at the participants (Limit to 165 words or less) Final program title and course description may be edited by Curriculum Committee. | | | |
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|--|------------|----------------------|--------|-----------|-------------|
| Will this class require special material (<i>books, dvd, tickets, handouts, etc</i>)? If so, please list. (<i>Handouts will be sent to participants electronically. If you must have the handouts printed please list the number of pages. Expense of handouts is \$0.10 per page, and will be printed front & back, black and white only</i>) | | | | | |
| List any other expenses you expect to have with this class: | | | | | |
| Will this class require transportation? Yes ____ No ____ | | | | | |
| *What type of equipment will be needed? (<i>This information is imperative to booking classroom space</i>). | | | | | |
| Laptop | Projector | Speakers | Podium | Presenter | White Board |
| CD Player | DVD Player | Other (please list): | | | |
| What type of room setting do you require? | | | | | |
| Classroom | U-Shape | Other (list) | | | |

Instructor Information

| | | | |
|---|---|--------------|--|
| Instructor Name | | Best Phone # | |
| Email Address | | | |
| Mailing Address | | | |
| Instructor Biography (<i>This should be one paragraph, in narrative form. Please limit the length to approximately 50 – 75 words</i>) | | | |
| <i>Please submit a current photo for our catalog & website</i> | | | |
| Many of our instructors do elect to donate their instructional time to OLLI, but we would like to give everyone our compensation options. Please check which option you would prefer: | | | |
| Donate your services: ____ | Use as community service for Tenure: ____ | | |
| Payment (\$25 per instructional hour): ____ | Mileage reimbursement only: ____ | | |
| OLLI Membership (Valued at \$50) ____ | | | |
| Class certificate: (Value up to \$____) for future class within the fiscal year ending June 30 ____ | | | |

***All OLLI classes and activities are subject to the proposal and approval process via the Curriculum Committee and OLLI Staff.*

Instructor's Acknowledgement / Signature: _____

Course Proposal prepared and submitted by: _____

Date Submitted: _____