



# COURSE PROPOSAL

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Email Address: \_\_\_\_\_

## SPECIFIC COURSE INFORMATION

Suggested title of course you would like to teach:

\_\_\_\_\_  
\_\_\_\_\_

COURSE DESCRIPTIONS: (Briefly describe the course content.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OUTLINE WHAT YOUR STUDENTS WILL LEARN: (Be specific)

- 1.) \_\_\_\_\_
- 2.) \_\_\_\_\_
- 3.) \_\_\_\_\_
- 4.) \_\_\_\_\_
- 5.) \_\_\_\_\_

WHAT TEACHING METHODS WILL YOU USE?

---

---

---

TARGET AUDIENCE: (Who would take your class?)

---

Maximum Class Size:

Recommended Total Class Hours: \_\_\_\_\_

Recommended # Sessions/Week: \_\_\_\_\_

Recommended # Hours/Session: \_\_\_\_\_

Special equipment needed:

---

---

What material(s) would the student need to purchase?

---

---

Estimated cost(s):

---

---

Have you taught this course or plan to teach this course at another school/college in the area?

---

**INSTRUCTOR INFORMATION**

Other courses you may be qualified to teach:

---

---

Describe your teaching experience:

---

---

---

---

---

Describe your background and expertise relating to the course you would like to teach:

---

---

---

---

Who may we contact as a reference concerning your teaching/expertise?:

---

---

---

---

\*\*\*Please attach a current resume and any other course information that will help us in reviewing your proposal.\*\*\*

Send proposal to:  
Continuing Education  
1300 Fifth Street  
Wenatchee, WA 98801  
Fax: 509.682.6481  
Email: [mgedrose@wvc.edu](mailto:mgedrose@wvc.edu)  
Questions: 509.682.6906