



Class Proposal

Use one Class Proposal Form for EACH class offering

Please complete the Instructor Application and read the Volunteer Instructor Agreement before submitting.

Name: _____ Address: _____
Last First MI Street City State Zip Code

Home Phone: _____ Work Phone: _____ Cell Phone: _____

E-mail: _____ Fax: _____ Have you instructed this class before? Yes No

Proposed Class Title: _____ **Min:** (students) _____ **Max:** (students) _____

Please limit titles to 35 characters.

Proposed Class Description:

Please limit class description to approximately 200 characters for the printed catalog, additional class information can be shared online.

2011 – 2012 Scheduling: Fall: 9/26/11–11/2/11 (6 Week Session); Deadline: Aug. 1, 2011; Winter: 1/30/12-3/22/12 (8 Week Session); Deadline: November 15, 2011; Spring 4/30/12–5/22/12 (4 Week Session); Deadline: February 29, 2012

SESSION	DAY	TIME	WEEK TO BEGIN	# OF CLASSES	LOCATION	STUDENT AGE
<input type="checkbox"/> Fall	<input type="checkbox"/> Monday	<input type="checkbox"/> 6:30 – 8:30 p.m.	<input type="checkbox"/> First <input type="checkbox"/> Second	<input type="checkbox"/> 1 <input type="checkbox"/> 2	<input type="checkbox"/> Hillside	<input type="checkbox"/> Adult (18+)
<input type="checkbox"/> Winter	<input type="checkbox"/> Tuesday	<input type="checkbox"/> 6:30 – 7:30 p.m.	<input type="checkbox"/> Third <input type="checkbox"/> Fourth	<input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> Timberline	<input type="checkbox"/> Youth
<input type="checkbox"/> Spring	<input type="checkbox"/> Wednesday	<input type="checkbox"/> 7:30 – 8:30 p.m.	<input type="checkbox"/> Fifth <input type="checkbox"/> Sixth	<input type="checkbox"/> 5 <input type="checkbox"/> 6	<input type="checkbox"/> West	<input type="checkbox"/> Youth & Adult
	<input type="checkbox"/> Thursday		<input type="checkbox"/> Seventh <input type="checkbox"/> Eighth	<input type="checkbox"/> 7 <input type="checkbox"/> 8	<input type="checkbox"/> No Preference	<i>Specify age:</i>

Any instructor teaching students age 17 or younger MUST allow the Boise School District to conduct a background check, (REGARDLESS of any previous background checks conducted by other organizations) and be fingerprinted for an FBI Criminal History Check.

Materials:

- Students will purchase the materials listed below.
- Instructor will purchase the materials listed below and be reimbursed by Community Education.

Item	Vendor (where purchased)	Quantity	Cost (per student)
(Attach list of additional items, if necessary)		TOTAL	

Room Requirements: (open space, music room, kitchen, etc.) _____

Equipment Needs: (computer, projector, TV, etc.) _____

Instructions for Students: (items to bring to class, etc.) _____

Assistants: (Anyone assisting you with this class. Assistants must complete an Instructor Application)

First Name	Last Name	E-mail	Phone	Alternate Phone

(Attach list of additional names, if necessary)

I verify that I have read and understand the Boise School District Community Education Program Volunteer Instructor Agreement and have designed my class to meet the established criteria.

Instructor's Signature

Date