|  |  |  |  |
| --- | --- | --- | --- |
| |  |  | | --- | --- | | **COURSE PROPOSAL**  **Lifelong Learning Institute at Virginia Tech**  Please complete this form for Program Committee review. | **A picture containing arrow  Description automatically generated** | |  |

**1. Short Course Title (60 characters max-please count spaces):**

**2. Instructor(s)/Coordinator(s)**

**Instructor 1 Instructor 2**

|  |  |  |
| --- | --- | --- |
| Name  Address  Phone  E-mail |  |  |

3. **Brief background of instructor(s)**

**(**all or part of this will be used in the catalog, usually **1 or 2 sentences)**

**4. Course description** (suitable for advertising the course in the catalog; 1 or 2 paragraphs, **100 word max**)

**5. Specific topics** to be covered in the number of classes proposed (bulleted list is fine). May not be included in the catalog but helpful for Program Committee review.

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **6. Preferred class size** |  | 15 or fewer |  | Up to 25 |  | Up to 36 |  | Up to 50 |  | 50+ |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **7. Preferred session** (include year) |  | Fall |  |  | Spring |  | 20 | Year |

**8. Preferred number of weeks/sessions** (classes generally meet once a week)

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Weeks: |  | 6 |  | 5 |  | 4 |  | 3 |

|  |  |  |  |
| --- | --- | --- | --- |
| One time only |  | Other length |  |

**9. Preferred format**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | In person |  | Zoom |  | Either format is acceptable |

**10. Preferred class length**

**\_\_\_\_\_\_**60 minutes \_\_\_\_\_\_\_75 minutes \_\_\_\_\_\_90 minutes \_\_\_\_\_\_ Other

**11. Preferred class time:** indicate #1 for first choice and #2 for second in the appropriate blocks.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Time | Monday | Tuesday | Wednesday | Thursday | Friday |
| 9-10:30 |  |  |  |  |  |
| 11-12:30 |  |  |  |  |  |
| 1-2:30 |  |  |  |  |  |
| 3-4:30 |  |  |  |  |  |

Comments about scheduling?

**12. Textbook or readings, if any** (The required item(s) will be listed in the catalog so that participants can purchase them before class. You may identify additional resources for participants on the first day of class.)

|  |  |  |  |
| --- | --- | --- | --- |
| Title or website | Required | Recommended | Handout |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**13. Materials participants will need to provide, if any**

If participants will need to pay a materials fee for supplies the instructor provides or purchase their own supplies, please estimate the amounts, if you can. (We will verify the amounts before the catalog is published.)

|  |  |  |  |
| --- | --- | --- | --- |
| Materials fee | $ | Supplies | $ |

**Comment or explanation:**

**14. Will copying of handouts be needed?**

A maximum of 25 B/W pages or 10 color copies per student is a general guideline; additional copying may require an extra student fee. (Handouts can also be distributed to students electronically in pdf.) Estimates of the number of pages to be copied, both B/W and color, will be helpful.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | B/W copies per student |  |  | color copies per student |

**15. Room and equipment requirements for in-person class:**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Projector/screen | |  |  | | |  | | |  | | | |  |
|  | Internet access: for instructor only or also for participants? | | | | |  | | | instructor | |  | | participants | | | |  | |
|  | Access to water |  | | |  | | |  | | | |  | | | |  | |

Other special room arrangement or equipment requests: Please describe. For example: lecture style set-up; seminar style (group around a center table); tables for working in small groups

**16. Please list potential guest presenters and their contact information**

|  |  |  |  |
| --- | --- | --- | --- |
| **17. Has this class been offered before through LLI?** |  | If yes, when? |  |

**Please complete this form and submit it as a Word document by email attachment to:**

Molly McClintock, Program Committee, Co-Chair, [mollymcclintock235@gmail.com](mailto:mollymcclintock235@gmail.com), 540-239-6432

AND Nancy Metz, Program Committee Co-Chair, [nancy.metz@vt.edu](mailto:nmetz@vt.edu), 540-998-1119

THANKS!