



Enrichment Course Proposal 15180

Canada Ave
Rosemount, MN 55068
651.423.7920 - Phone
651.423.7930 - Fax

Matt.mccabe@district196.org Adult Programming
Marisa.schroht@district196.org Youth Programming
Amanda.kuhn@district196.org Youth Programming

Instructor Info

Instructor/Contact Name: _____

Mailing Address: _____ City: _____ Zip: _____
self

Organization Name: _____

Phone: Home _____ Work _____ Mobile _____

Fax: Home _____ Work _____

Email: _____

Are you currently a District 196 employee? (yes/no) If yes, employee number _____

Short Biography

*In 50-75 words or less please write a biography of yourself that highlights the experience you bring to the proposed class. * Please include a jpeg photo of yourself*

Course Details

Target audience/age: Parent/Child Pair Adult Child (indicate grade/age level) _____ Adults w/Disabilities

Class format: Lecture Demonstration Hands-on Other

Course Title: _____

Course Description

*Write a course description for your class. Be specific and include at least three benefits for students taking the course. Use action verbs such as learn, discover, engage, etc. Refer to catalog for examples. *Descriptions may be edited based on department standards. Please include a jpeg photo of your class project or of those engaged in your activity (if applicable)*

Preferred dates: _____

Total # of sessions: _____

Start time: _____

End time: _____

Preferred location: _____

Min/Max participants: Min ____ Max ____

Supplies

List specific materials and equipment supplied by the instructor:

Fee for supplies: _____ (per student)

Materials and equipment supplied by the student:

of photocopies needed: (We will provide, but need originals three weeks prior to the first class date.)

***Additional supply needs, must be approved by coordinator.**

Special/Specific Needs

Classroom Requirements (check all that apply):

Lecture room	Classroom with door	Computer Lab	Gym	Kitchen lab	Fields
Chairs only	Tables/chairs	Sink	White board		Industrial tech area
Cart for hauling supplies in/out		LCD projector (must bring own lap top & extension cord)	Other	_____	

Set up time needed: _____

Take down time needed: _____

Compensation: Volunteer Employee Contracted Employee

Requested rate of pay (subject to negotiation): _____

Thank you for your interest in teaching with District 196 Community Education. You may return this form to the email address on the front page, the postal address listed or by fax. Please note details below:

- Use a separate form for each class.
- A submitted proposal is NOT an approved class. The program coordinator will contact you to confirm details.
- Confirmations/contracts of approved classes will be mailed for you to proof prior to the brochure printing.
- Please note, we publish three brochures annually. Deadlines for submission are months ahead of publication.
- Products and services may not be solicited in the classroom without coordinator approval.