

OLLI@CSUMB Course Proposal Form

Name:

Email:

Mailing Address:

City, State, Zip:

Primary Phone:

Alternate Phone:

Course Information

Describe your course in a way that is appealing to your audience, is concise, and explains the benefits participants will receive by attending. Please note if field trips, physical activity or special skills are required. This description should be as tight and catalog-ready as possible. Creative titles are greatly encouraged.

Title of Proposed Course:

Course Description: (Paragraph form - 120 words or less)

Instructor Biography: (Paragraph form - 45 words or less)

Course Details

Please indicated the proposed format for the course:

- A two-hour single presentation
- A course meeting for _____ weeks for _____ hours each. (Recommended 2 to 4 weeks)

Please indicate the maximum number of participants desired:

Minimum = 14 (set by OLLI@CSUMB) Maximum = _____

Course Schedule

Please indicated proposed semester: Fall (Sept. - Dec.) Spring (Jan. - May)

Please indicate the days and times best for you by marking an X on all that apply.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10am-noon						
2-4pm						
4-6pm						
6-8pm						

Please indicate any dates that will not work for you (example; unavailable the month of Oct.)

Course Logistics

Audio/Visual Needs:

It is recommended that you bring your own laptop. One can be supplied upon request. If using a Macintosh, you will need to supply your own connector (dongle). Please X below items you will require:

- Projector and Screen
- Computer, Projector and Screen
- DVD Player

If other, please specify:

Compensation

OLLI@CSUMB Faculty can be remunerated in a variety of ways. You may receive an honorarium; teach for a flat rate; or you may wish to contribute compensation towards OLLI@CSUMB scholarships and/or program needs*. We invite you to contribute your time, talent, and passion in a way that is both meaningful and rewarding to you.

(check all that apply)

- I am currently employed by CSU Monterey Bay
- I am not employed by CSU Monterey Bay
- I wish to donate my compensation to OLLI@CSUMB
- I wish to receive an OLLI@CSUMB Membership in lieu of compensation

We look forward to reviewing your proposal and thank you for your time and consideration.
Upon completion, please submit proposals via fax, mail or email to:

CSU Monterey Bay
Attn: OLLI@CSUMB #201
100 Campus Center
Seaside, CA 93955
(831) 582-5500
(831) 582-4367 (fax)

Michele Crompton
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