

EXTENDED EDUCATION COURSE PROPOSAL FORM

Course Title: _____

New Course Course Last Taught: Session _____ Year _____

New Instructor Instructor Last Taught: Session _____ Year _____

INSTRUCTOR #1 Data:

Name: _____

Employee ID: _____

Address (street, city, state, zip): _____

Home Phone: _____ Message Phone: _____ Fax: _____

Please check ALL applicable options:

Course Description Attached Course Description Emailed Biography Attached Biography Emailed

INSTRUTOR #2 Data:

Name: _____

Employee ID: _____

Address (street, city, state, zip): _____

Home Phone: _____ Message Phone: _____ Fax: _____

Please check ALL applicable options:

Course Description Attached Course Description Emailed Biography Attached Biography Emailed

SCHEDULING INFORMATION:

Proposed Meeting Dates: _____

Days of the week: _____ Meeting Times: _____ # of meetings _____

Room characteristics required: Desks Tables Windows Tech Room Sinks PC Mac

Other: _____

Room Request (SSU): _____ Off Campus Location _____

Type of credit requested: academic credit CEU noncredit

Department and course number (*if known*): _____

Enrollment minimum: _____ Enrollment maximum: _____

Supporting Information:

The following items **must** be submitted with a course proposal form before your class can be considered. *Please submit the following items on additional pieces of paper:*

- 1) **Course description for catalog.** A short, interesting paragraph describing the purpose, topics and audience for your course. Strive for a balance between theory (how to think about it) and practice (how to do it). Be sure to include the benefits for students who take your course.
- 2) **Target audience.** Who is the target audience for this course and what would be their motivation for taking the course?
- 3) **Course objectives:** specific behavioral objectives and how they will be achieved (what knowledge or skills will

Audio Visual Aids Request. (e.g. VCR, overhead projector, tape recorder, flipchart, etc.)

Type of equipment: _____ Dates/times needed: _____

Computer Usage. All instructors using computer labs are required to attend a lab orientation meeting.

I would like to reserve a Windows Lab Mac Lab

Dates lab needed: _____ All labs have Microsoft Office and are networked to the Internet. For details regarding lab specifications and software, see www.sonoma.edu/IT/labs/

Software needed: _____ Hardware needed: _____

I will rely solely on University owned software and hardware

I will provide my own software. I own _____ copies of this software.

I will obtain publisher's permission to use software for this course (a letter from the publisher is required and must be received by Extended Education at least two weeks prior to the start date of your class).

Instructor signature: _____ Date: _____

Additional Expenses. Please list other items that will impact the course budget, and fees charged to students, such as paid guest speakers, film rental, facility rental, paid ads, etc. These expenses will be added to the course fee.

Paid Guest Speaker(s) (Please include rationale for guest speaker with your course outline.)

Name#1: _____ Address: _____

Date of Appearance: _____ Proposed Fee: _____

Name#2: _____ Address: _____

Date of Appearance: _____ Proposed Fee: _____

Facility Rental

Facility Name: _____ Address: _____

Contact Person: _____ Phone: _____ Rental Fee: \$ _____ per _____

Other:

Item: _____ \$ per item: _____

Item: _____ \$ per item: _____

Field Trips

Will you require a State Vehicle for field trip transportation: Yes No

If yes, what type of vehicle do you need? _____

Please list your destination and, if any, the admission fee:

Destination: _____ Date: _____

Destination: _____ Date: _____

Publicity. All publicity materials must be reviewed by Extended Education prior to dissemination and a copy provided to our office. A flyer template will be mailed to you for your use. For more information contact Program Coordinator, (707) 664-2394.