

*Luna Community College  
Community & Continuing Education*

## COURSE PROPOSAL

COURSE TITLE _____	
INSTRUCTOR(S) _____	
DATE SUBMITTED _____	MAXIMUM ENROLLMENT _____

Please write a **ONE-PARAGRAPH DESCRIPTION** of the course for publicity (*subject to editing*).

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### INSTRUCTOR INFORMATION

Name \_\_\_\_\_ SS# \_\_\_\_\_  
Address \_\_\_\_\_  
City & State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone (w) \_\_\_\_\_ (h) \_\_\_\_\_ E-mail \_\_\_\_\_

### SCHEDULING INFORMATION

Circle preferred day (s) of the week: Mbn Tues Wed Thur Fri Sat Sun  
Preferred starting date \_\_\_\_\_ Ending date \_\_\_\_\_  
Preferred hours \_\_\_\_\_ Number of weeks \_\_\_\_\_  
Special arrangements or equipment needed \_\_\_\_\_

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Is the course for a **SPECIFIC AGE** or **INTEREST GROUP**? Yes No Age group \_\_\_\_\_  
Explain \_\_\_\_\_

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Aside from tuition fees, are there any additional costs for the course? Yes No  
If yes, explain \_\_\_\_\_

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## **COURSE CONTENT**

**Please list specific COURSE OBJECTIVES**

a. \_\_\_\_\_

\_\_\_\_\_

b. \_\_\_\_\_

\_\_\_\_\_

c. \_\_\_\_\_

\_\_\_\_\_

d. \_\_\_\_\_

\_\_\_\_\_

e. \_\_\_\_\_

\_\_\_\_\_

**List the TOPICS to be covered**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please explain your METHODS OF PRESENTATION & TEACHING** (*lecture, demonstration, field trip, TV/VCR, etc.*)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Other than the LCCampus, do you have other ideas as to the LOCATION of your proposed course?**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Luna Community College*  
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# INSTRUCTOR VITA

Attach your resume if you wish.

Name \_\_\_\_\_ SS# \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_ E-mail \_\_\_\_\_

May we give your phone number to students? \_\_\_\_\_

May we contact you at work? \_\_\_\_\_

### Title(s) of proposed courses

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### EDUCATION

Institution/College	Gty/State	Dates	Degree	Major
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

### RELATED WORK EXPERIENCE

Provide a brief summary of work experience as it relates to the course(s) you are proposing.

Explain how your experience qualifies you to teach this subject.

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**REFERENCES**

Please provide three references for us to contact.

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

**I CERTIFY THAT THE INFORMATION ON THIS AND ANY  
ATTACHED FORM IS TRUE AND COMPLETE TO THE BEST OF  
MY KNOWLEDGE**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Return this form and attachments to:**

**Luna Community College  
Community & Continuing Education  
366 Luna Drive  
Las Vegas, NM 87701**

454-5311 \*\*\* 1-800-588-7232