For office use only:
_____Date Received
_____ JW / JI / O
_____Accepted/Decline
_____HR Completed
_____IT Request
_____Bookstore Order
_____Supplies

SU/FL 2014 Non-Credit Proposal:

Community Education • Lincoln Land Community College

Please submit a separate proposal for each class.

Return no later than December 20, 2013.

Name: _____ Social Security Number _____

Email: _____

Address: _____ City_____ State _____ Zip Code _____

Phone: Cell_____ Home_____ Work _____

******Additional HR paperwork requirements will be issued upon contract assignment.***

Briefly describe any previous teaching experience (subjects/ages/ employers) and/or give us some information about your experience with the subject you propose to teach:

_____

_____

_____

Professional Reference: Name _____

Phone_____ Email: _____

LLCC Community Education Dept. Contact: ❑Judy Wagenblast ❑Jessica Ingold ❑Not yet established

Please mark all preferred:

❑ Repeated class: Title _____ Last taught in: mm/yy_____

❑ New Class - Proposed Subject: _____

Possible Title: _____ _____

Description of Class Content: *(Please write a 3-4 sentence description–**for new class/instructor only**)*

_____

_____

_____

List three class objectives. What will a student know or be able to do as a result of this class?

1. _____
2. _____
3. _____

Proposed # of students per class: _____

❑ YES (ages 18 & under) ❑ CEW (over age 18) ❑ Combined *(specify age requirements below)*

Minimum age of student: _____ Maximum age of student (if applicable): _____

Proposed Schedule: Available dates for SUMMER/FALL 2014: June 9 - December 19, 2014

**F/S/SU classes cannot be held between 5/23 and 7/11 due to summer campus closure schedule.*

**The college is closed 9/1, 10/10, 11/4, 11/26 – 11/30. No classes scheduled.*

Number of sessions per class:

❑ 1 day only ❑ 1 day per week for _____weeks (*maximum of 4 wks. allowed for most classes*)

❑Other: _____

Preferred days of the week: (M – SU)
1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Preferred length and time of class: Time(s), hour(s) and a.m./p.m.
1st Choice: _____ 2nd Choice: _____ 3rd Choice: _____

Preferred campus location:
❑ Beardstown ❑Hillsboro ❑ Jacksonville ❑Litchfield ❑ Springfield ❑ Taylorville

Specific building preferred (if applicable):
❑ Logan Hall ❑ Menard Hall ❑ Millennium Center ❑ Montgomery Hall ❑ Trutter Center
❑ Workforce Development Center ❑ other:_____

Type of meeting room preferred: ❑ classroom ❑computer lab ❑ other _____
Specific needs: ❑ tables ❑ desks ❑ open space ❑ sink ❑ other _____

IT/Resources – *please be very specific in regards to technology requests*:
❑ dry erase board ❑ computer ❑ Internet access
❑ projection screen ❑ other _____

All IT and supply requests *must* be submitted in advance.

Textbook/Supply information: ***To ensure delivery, LLCC bookstore requires a minimum of 4 weeks notice.***
❑ Required _____
Title ISBN# (if known)
❑ Optional _____
Title ISBN# (if known)

❑ Supplies students must bring – please provide a detailed list *(will be posted online/catalog):*
_____
_____

❑ If additional supplies or manuals will be provided to the students, please list and indicate a suggested supply fee which would be paid directly to you. ***Pre-approval required***. $_____ per student for the following supplies:
_____
_____
_____

❑ Special instructions for students, if any: _____
_____
_____

Actions I can do to help promote this class include:
❑ on website/FB page ❑ promoting to familiar groups ❑ distributing promotional materials
❑ other _____

Other information important to the review of this proposal: _____
_____
_____

Please return to:
Community Education, Lincoln Land Community College,
5250 Shepherd Rd., Springfield, IL 62794-9256
For more details call 217-786-2432

Judy.Wagenblast@llcc.edu Director of Community Education
Jessica.ingold@llcc.edu Coordinator of Youth Enrichment Services/CEW

Community Learning is a self-sustaining program of LLCC.