

Course Proposal Form

RCCD

RIVERSIDE COMMUNITY
COLLEGE DISTRICT

COMMUNITY EDUCATION

MORENO VALLEY COLLEGE | NORCO COLLEGE | RIVERSIDE CITY COLLEGE

CONTACT INFORMATION

Name (Last, First, M.I.)			Date		
Street Address		City		State	Zip Code
Phone (Home)	Phone (Work)	Phone (Mobile)	Email		

COURSE PROPOSAL

Please attach course outline and Student Learning Outcomes, your resume and names, addresses and phone numbers of three work references.

Dates _____ Proposed title of course _____

Course description(50 words or less). This is very important as a great description will increase enrollment. We may edit your copy. Attach another sheet if necessary.

Location: _____	Suggested course tuition (price may change) _____
Proposed Instructor(s): _____	Number of hours in course _____
Course Materials & Source: _____	Number of meetings _____
If class prepares for certification testing, indicate certification and certifying body: _____	Day(s) of the week and times: 1st Choice _____
Instructor Certification: _____	2nd Choice _____
Instructor to student ratio: _____	Date(s) preferred: 1st Choice _____
Student Prerequisites: _____	2nd Choice _____
Format of presentation (lecture, workshop, other) _____ _____	