NON-CREDIT WORKSHOP PROPOSAL FORM

Instructor's Signature:

Chico State Enterprises

Regional & Continuing Education, CSU, Chico, Chico, CA 95929-0250 Phone: 530-898-6105, Fax: 530-898-4020

Date

If you wish to teach in the California State University, Chico Extension program, please complete this form and return it to Continuing Education. A separate form must be completed for each workshop proposed.								Room
Requested Scheduling: F	lested Scheduling: Fall 20 Winter Session 20 Spring 20 Summer 20							Confirm
2. Proposed workshop title:								Keys
								Name Tags
3. Please provide a course description and attach other supportive information which may be used for marketing purposes. Include a resume or C.V.								Material List
								2a. Type of Course
4. Instructor Name:								(Check and complete those that apply)
4. Ilistructor Name.								Online/Media
Home Address:								Available as a credit course?
								Department & #:
Day Phone:	Phone: Evening Phone:							Registration Deadline:
E-mail Address:		Can your contact information be released to interested students? Home Work					Work	(if no deadline, must meet first class)
2 main additions.					your someon mornation so released to microsto	E-mail Address		Minimum Enrollment
5. Please provide a brief biography (may be used for marketing purposes). Include a resume or C.V.:								Maximum Enrollment
								Course should NOT be advertise
Requested Scheduling:								9. Pay status
Dates (mo/day) Days of	of Week Start/End Time Building Room Special Room/Equipm				Special Room/Equipment Needs (please be	ent Needs (please be specific)		Independent Contractor (Complete agreement)
								CSU, Chico Payroll
								New Instructor
7. Please describe target audience for this course: Will you provide a mailing list? Yes No							res No	
8. Suggested base fee: \$	Ado	litional fees per studer	it necessary to	support this cours	se. (e.g. materials, lab, etc.): \$ Materials	als fee \$	Lab fee	
OTAL FEE per student: \$ All costs must be presented to Continuing Education prior to autorization of work.								

Approved:

revised 2021

Date

CONTINUING EDUCATION USE ONLY

Course

Term