***Adult Education Enrichment Class Proposal***

***Contact Information***

Instructor’s name:

Email address:

Cell number:

May we text you? Yes No

Other phone numbers:

Address:

***Proposed Class***

Title:

Description:

Instructor qualifications:

Student pre-requisites:

Type of room or special facilities required:

Preferred day(s):

Preferred time (evening classes usually begin between 6:00 & 7 pm):

Number of sessions:

Length of each session:

Approx. Materials Fee (paid by students to instructor):

Minimum # of students you feel is needed to teach the class:

Maximum # of students you can accommodate in your class:

**Catalog Description of class**: (25-35 words as it will appear in the catalog that accurately describes and markets your course). Tell the prospective student what they will gain by this experience. Be Positive. Be Creative. Pictures can be place on the website. Website description can include more detail.

**Return to: Lori Sanchez at** lsanchez@vrae.org or the address below or call 203.924.6651 ext.110