OLLI@UGA Class Proposal Form 2021

After completing this form, use the “Save As” function in the File menu, then email the form as an MS Word document [to your](mailto:olli@uga.edu) recruiter (see below). The recruiter will forward the CPF to [olli@uga.edu](mailto:olli@uga.edu).

P DF or handwritten forms cannot be processed.

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| **Term (check ONLY one per class offering)** | | | | | | | | **CPF Submittal Deadline** | | | | | **Important – Please Note:** | | | | |
| **Term A (Early Spring): February 1 – April 2** | | | | | | | | **Monday, November 2: 9am** | | | | | **All CPFs must be received  by the OLLI@UGA office before the submittal deadline for the term in which  the class is to be taught –  no exceptions!** | | | | |
| **Term B (Late Spring): April 19 – June 18** | | | | | | | | **Monday, January 18: 9am** | | | | |
| **Term C (Summer): July 6 – August 5/6** | | | | | | | | **Monday, April 30: 9am** | | | | |
| **Term D (Early Fall): August 17 – October 8** | | | | | | | | **Monday, May 14: 9am** | | | | |
| **Term E (Late Fall): October 18 – December 17** | | | | | | | | **Monday, July 30: 9am** | | | | |
|  | | | | | | | | | | | | | | | | | |
| **Presenter Contact Information** | | | | | | | **Recruiter Contact Information** | | | | | | | | | | |
| **Name**: | | | | | | | **Name**: | | | | | | | | | | |
| **Email**: | | | | | | | **Email**: | | | | | | | | | | |
| **Phone**: | | | | | | | **Phone**: | | | | | | | | | | |
| **Presenter Mailing Address**: | | | | | | | | | | | | | | | | | |
| **Presenter Biography:** (*75 words max, 3rd person;*  *we reserve the right to edit for length and clarity)*  *Use bio on file* | | |  | | | | | | | | | | | | | | |
| **Class Title:** | | |  | | | | | | | | | | | | | | |
| **Class Description:**  (*100 words max, 3rd person;*  *we reserve the right to edit for length and clarity)*  *Use description on file* | | |  | | | | | | | | | | | | | | |
| **Materials/Supplies Fee, if any, per student**. | | |  | | | | | | | | | | | | | | |
| **Required Text(s), if any**: *Please include the title, author, and ISBN.* | | |  | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **Schedule Preferences**  **Please provide at least three dates to help us schedule your class** | | | | | | | | | | | | | | | | | |
| **Enter Dates:** | **1st choice** | | | **2nd choice** | | | | | **3rd choice** | | | | | **4th choice** | | | |
|  | | |  | | | | |  | | | | |  | | | |
| **Enter Class**  **Details:** | **Preferred Class Start Time:** | | | | **Class Length:** | | | | | | **How many times will this class meet?** | | | | | | **Max Enrollment:** |
| **10:00 am 12:00 noon**  **10:30 am 1:00 pm**  **2:00 pm** | | | | **60 min 90 min**  **75 min 120 min** | | | | | | 1 | 4 | | | | 7 | 100  Other: |
| 2 | 5 | | | | 8 |
| 3 | 6 | | | | 9 |
| ***I can present my class via Zoom***  ***I would consider presenting my class via Zoom if I had more information or assistance***  ***My class is not suitable for presentation via Zoom (e.g., requires in-person activity)*** | | | | | | | | | | | | | | | | | |
| ***I consent to have my presentation recorded (enter initials here):*** | | | | | | | | | | | | | | | | | |
| ***I agree not to advertise or sell any products or services to participants in my class (enter initials here):*** | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **For Office Use Only** | | | | | | | | | | | | | | | | | |
| **Code** | | **Category** | | | | **#Sessions** | | | | **Fee** | | | | | **Schedule** | | |

2021 CPF