MANCHESTER
COMMUNITY
COLLEGEExcursions in Learning
New Course Proposal

Complete and mail to Linda Armstrong, Excursions in Learning, MS #16, P.O. Box 1046, Manchester, CT 06045-1046; submit in-person to the Continuing Education Office, LRC B147g; fax to 860-512-2801 or email to LArmstrong@manchestercc.edu. New instructors must include a résumé and three references or letters of recommendation with the new course proposal.

For more information, please contact Linda Armstrong, Excursions in Learning Youth Programs at 860-512-2804 or go to www.manchestercc.edu/excursions.

INSTRUCTOR INFORMATION

First Name	MI	Last Name	C	Date	
Street Address (including apt/unit #)					
City				State	Zip
Cell Phone Number			Email Address		
Date of Birth			Last Four Digits of Social Security Number		

COURSE INFORMATION

Course Title				
Grade Level (select one) 🗌 K-2 🗌 3-5 🗌 6-8 🗌 Other:	Preferred Semester			
Course Description (Please provide one paragraph description that includes activities, objectives and goals. Be as specific as you can.)				
Instructor Biography: (Please provide four-five sentences about yourself starting with your college degrees. This will be printed in our catalog.)				
CLASSROOM NEEDS/EQUIPMENT				

Which would you prefer? 🗌 Desks 🔲 Tables	Type of computers required? 🗌 Mac 🔲 PC
Do you need an open space for movement activities? 🛛 Yes 🗌 No	Software needs, please specify
Do you need computers for all students? 🛛 Yes 🗌 No	What type of flooring do you prefer? \Box Carpet \Box Tile
Do you need a computer for the instructor? $\ \Box$ Yes $\ \Box$ No	Do you need a sink? 🗌 Yes 🗌 No
Do you need a projector? 🗌 Yes 🗌 No	Any other needs? Please explain.
Do you need a CD player? 🗌 Yes 🗌 No	