

**LOS ANGELES VALLEY COLLEGE
COMMUNITY SERVICES PROGRAM CLASS PROPOSAL & WORKSHEET**

Please Attach: <input type="checkbox"/> Resume <input type="checkbox"/> Class outline <input type="checkbox"/> Description For Brochure

Attn: Community Services/Class Proposal
5800 Fulton Ave.
Valley Glen, CA.91401
(818) 947-2577 Ext.4172
(818) 947-2930 FAX
comm_serv@lavc.edu

CLASS TITLE: _____

QUARTER: Summer Fall Winter Spring

INSTRUCTOR: _____

Phone: _____

(ADDRESS) (CITY) (ZIP)

E-Mail Address: _____ Web Site: _____

Soc. Sec. #: _____

Employed elsewhere in LACCD? Yes Employee.# _____ No

Brief description of class: (Attach a class outline): _____

Objective of class: _____

Sources for Possible Registrants: _____

Minimum age for Registrants _____

Please complete other side

Have you ever been convicted of any felony or misdemeanor (except a minor traffic violation)?

Yes No

If yes, give details (use additional sheets if necessary): _____

(A "yes" answer does not automatically disqualify you from employment, since a nature of the offense, date, and the job for which you are applying will also be considered.)

Do you allow tape recorders to be used? Yes No

Do you have a mailing list? Yes No

If yes, how large? _____

No. of class No. of hours Day of week Hours
sessions _____ per session _____ preferred _____ preferred _____

Class limit (maximum) _____

Special Needs: _____

A-V Equipment Needs: _____

Room Requirements: _____

Will you have a charge for materials fees and/or handouts? Yes No

If Yes, how much? _____

If you will be charging a fee for materials and/or handouts, please include a copy of all materials with this proposal.

Qualification of instructor to teach this class (Attach Resume): _____

