

## Lifetime Learning Institute of NOVA Course Proposal

*The following information is essential. Please answer all questions on **BOTH PAGES**.*

**COURSE TITLE:**

**COURSE DESCRIPTION:** *(Provide brief description of the course that is suitable for inclusion in the course catalog.)*

**NUMBER OF SESSIONS:**

**SCHEDULING COURSES:** *LLI courses generally meet one day a week for one or more weeks rather than more than once a week. Courses generally meet for 1-1/2 hours, but other lengths of time can be arranged.*

**PREFERRED DATE(S):**

**ALTERNATE DATE(S):**

**PREFERRED TIME:** *(Check preference.)*

10:00 – 11:30 a.m. \_\_\_\_\_ 1:30 – 3:00 p.m. \_\_\_\_\_ Other \_\_\_\_\_

**SUGGESTED LOCATION:**

**NUMBER OF STUDENTS:** *Class size is determined by space requirements but may also be set by the instructor. Enrollment that does not meet the minimum may result in course cancellation.*

**MINIMUM:** *(Smallest number for which class will meet)* \_\_\_\_\_

**MAXIMUM:** *(Specify preference for maximum number of attendees; space assignment may affect this number)* \_\_\_\_\_

**SUGGESTED COORDINATOR:** (Name, home and cell phone numbers, mailing address, email address)

**SPECIAL CLASSROOM REQUIREMENTS:** (Be as specific as possible.)\*

Is this a visual projection presentation? \_\_\_\_\_

If an LLI computer is required, what program/format (PowerPoint, Word, PDF, Apple, Open Office, etc.) will be used? \_\_\_\_\_

*Check all items that are needed:*

Wi-Fi \_\_\_\_\_ LLI Computer \_\_\_\_\_ DVD Player \_\_\_\_\_ Projector \_\_\_\_\_  
 Screen \_\_\_\_\_ Laser Pointer \_\_\_\_\_ Voice Amplification \_\_\_\_\_ Podium \_\_\_\_\_  
 Table \_\_\_\_\_ Other \_\_\_\_\_

\*If the course will be presented on the NOVA Annandale campus, all of these resources are already available.

**SUPPLIES/MATERIALS:** (If students are expected to purchase materials for the course, describe them and list the cost per student.)

**INSTRUCTOR BIO:** (Provide a brief biography for inclusion in the catalog, especially parts of your background that pertain to the course being offered)

**INSTRUCTOR:** (Name, address, home, cell and work phone numbers, email address. This information will not be published in the course catalog but is needed for administrative purposes.)

**Submitted by:** (Include name, phone number, and email address.)