



Nash Community College
Continuing Education Class Proposal Form

Class Information

Class Title: _____

Description of Class: _____

Outline of Class: Goals / Objectives / Topics

Target audience: _____

Maximum number of students: _____

Proposed Start/End Dates: _____

Proposed Number of weeks or class sessions: _____

Equipment needs?: _____

Supply needs?: _____

Textbook Required?: _____

On-campus or Off-campus location?: _____

Instructor Information

Name: _____

Address Line 1: _____

Address Line 2: _____

City: _____

State: _____ Zip Code: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Fax Number: _____

Email Address: _____

Please forward this form to: Carla Dunston, Dean Continuing Education; Fax 252-451-8451 or cdunston@nashcc.edu

Thank you

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