



Business and Industry Center

Community/Continuing Education Course Proposal

Thank you for your interest in teaching a community education course at Pulaski Technical College. We are always looking for new class ideas and instructors. We will review your proposal and contact you with any questions. Please be as detailed as possible in your program description, as this will help us determine if the class would be a good fit for our program.

(Proposed Course Title)

Instructor Name:	
Address:	
City/State/Zip:	
Phone (Cell or best #):	
Email address:	
Website (if applicable):	

Program Description:

Will students need to bring their own supplies? Yes ☐ No ☐

If Yes, list all supplies students will need to bring in order to complete the class:

What is the materials fee (if any) per person? \$ _____

Suggested registration fee per person? \$ _____

Preferred Day(s) of the Week for Class:

- ☐ Sunday ☐ Day
☐ Monday ☐ Evening
☐ Tuesday
☐ Wednesday Preferred Time: _____
☐ Thursday
☐ Friday
☐ Saturday

Duration of Class:

Total Hours of Class: _____

Total Number of Sessions: _____

Amount of Time Per Session: _____

Preferred Dates of Class if applicable:

Minimum # of students: _____ **Maximum # of students:** _____

Please include a resume or brief biography of your talents related to this particular course. Send completed form and resume/biography via mail, fax or email to:

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