

COASTAL SENIOR COLLEGE

91 Camden St., Suite 402, Rockland, ME 04841

REPEAT PROPOSAL FORM

Date: _____

This form is to be used only when an instructor is proposing to repeat a class which has been taught previously for CSC (or a class for which a full proposal is on file). Any and all changes must be indicated below, and ALL books and supply requests must be indicated here.

Instructor Name: _____ **Proposed Course Dates:** _____

Course Name: _____

Desired location, day of the week, and time: _____

Semester course was taught previously: _____

REQUIRED INFORMATION: TEXT: incl. Publisher, Cost, ISBN number

Changes in instructor contact information: (Address, phone, e-mail, etc.)

Changes in room arrangement, maximum or minimums, expectations

Please fully describe course if there will be any difference in content or if you want a clearer description in our advertising pieces. (Use separate sheet, if necessary)

Note: Any course details not listed here will be described using previously submitted information. _____

