Submission Forms for Conducting/Hosting Adult Education Class

Name _____

Address _____

Telephone/e-mail _____

Mobile phone _____

Class Subject _____

Material Sources: Title/Author

       _____

       _____

       _____

       _____

       _____

Class Location _____

Beginning Date _____   Ending Date _____

Class Time _____ Day of the week _____
Anticipated Class size _____

Do you need equipment/material from Christian Education?
_____ Yes _____ No

Approved _____   By_____

              _____

              _____

Not Approved _____   By_____

              _____

Reasons_____
_____
_____
_____

Date Submitted _____

Date Approved/Not Approved _____

See other side for Hosting Adult Education classes

Submission form for Hosting Adult Education classes

Name _____

Address _____

Telephone/e-mail _____

Mobile Phone _____

How large of a group can you accommodate?_____

Is there ample parking? Where? _____

Would there be a problem if attendees brought children? Yes___   No ____

If No, explain (on site baby sitting, accommodations for children, etc):

_____

_____

_____

Do you need equipment/material from Christian Education? (coffee pots, etc)

_____ Yes _____ No

Explain: _____

_____

_____