





CLASS PROPOSAL FORM Instructor Information: (Please attach current résumé or CV.)

Name :				
Home Address:				Zip:
Home Phone:				
E-mail:				
			week course D a one-time lecture	
Proposed Class Title:				
Proposed Location:	□ Riverside		ge/Palm Desert	
Proposed Quarter:	□ Fall	□ Winter	□ Spring	
Course or Lecture Description:				

Please use the reverse side of the page if you need more space.

Return to	: UCR Palm Desert Osher Lifelong Learning Institute 75080 Frank Sinatra Drive Palm Desert, CA 92211
Call: Fax:	(760) 834-0800 or (760) 834-0796