



Creative Lifelong Learning
Granville County Senior Services
Application to Teach

Basic Information

Instructor's Name: _____ Date: _____

Address: _____
Street City Zip

Phone: Primary Phone: _____ Secondary Phone: _____

Email: _____

Class Description

Class Subject / Suggested Title (Make it interesting and to the point!) _____

Type of Class: Lecture [] Demonstration [] Workshop [] Hands-on []

Please provide a brief description of the class for our catalog: _____

If there is a materials/supply fee for your class, how much? _____

List of equipment you will need provided for your class _____

Please select all sessions in which you are able to teach

Fall Session: Sept. 6 - Dec. 20 [] Winter Session: Dec. 21 - Mar. 17 []

Spring Session: Mar. 20 - June 20 [] Summer Session: Jun. 21 - Sept. 11 []

Please list the days and times you are available to teach, including Saturdays. _____

How much time is needed for this class? (example: 1 1/2 hours each day for 3 days) _____

Any other information that you need us to know

Experience

Tell us a little about yourself and your knowledge of this subject. This will be your bio for our catalog.

Please list any other classes you might be interested in teaching. _____

Thank you for your interest in teaching for **Creative Lifelong Learning** of Granville County!

Please initial if you would like to receive the stipend for this class. _____

Please *sign* if you are more than 20 miles from Oxford and would like mileage paid. _____

Please submit this application **online if possible** or send to:

Granville County Senior Center
107 Lanier St. (deliver in person)
PO Box 1287 (mail)
Oxford, NC 27565

Contact Information: 919-693-1930

<http://www.granvillecounty.org/residents/senior-services/locations/main-office/>