

**Instructions:** Please complete and return this form to the Division. You may attach additional pages as necessary. Please complete a separate form for each course you desire to teach. We will keep this information on file until you request that we purge it from our records. You are welcome to review and/or update this information at any time. We will contact you as training opportunities are identified. You are welcome to share this form with anyone else you think might be interested and qualified to conduct training for the Division of Continuing Education.

<b>Contact Information</b>			
First Name:	Last Name:		MI.
Credentials and Experience – <i>Please specify if you are currently an employee of Clarion University.</i>			
Company:		Web Site:	
Street		Street 2:	
City:		State	Zip:
Phone:	Fax:		email:

<b>Course Information</b>			
Course Title:			
Course Description:		Course Objectives:	
Intended Audience/Target Market:		CEUs Offered?	CEUs Accredited by:
		Accredited Status:	
Prerequisites or other requirements to attend class:			
Total Classes:	Duration per Class:	Class Frequency:	Facility Requirements – Specified Preferred Facility/Location if Known:
Min. Class Size:		Max. Class Size:	
Course Text including ISBN:			Is Text Required or Optional:

**For Administrative Use Only:**

**Please return this form to:**

Clarion University of PA  
 Division of Continuing Education  
 Room 210, Dana Still Hall  
 Clarion, PA 16214  
 814.393.2227  
 Fax 814.393.2741