

Saint Mary's College of California
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KALMANOVITZ
SCHOOL OF
EDUCATION

CONTINUING EDUCATION PROPOSAL

(Please complete a separate proposal for each course/seminar)

Instructor's Name: _____
(Please attach a complete resume to this form)

The following information may be provided via attachment(s):

Title of course: _____

Course Description: (a brochure or other document with this information is acceptable)

This class will meet for: _____ 5 instructional hours (.5 CEU)
_____ 10 instructional hours (1.0 CEU)
_____ Other (please list hours)

Proposed teaching date(s) & time(s):

List competencies/topics to be covered in this course:

List objectives:

Describe teaching strategies to be used:

**Return to: Saint Mary's College, Jeannie Harberson, PMB 4350, Moraga, CA 94575
or via e-mail to jhh3@stmarys-ca.edu**

Date submitted: _____

Coordinator approval: _____ Date: _____