



Recreation and Senior Services
OASIS Senior Center Volunteer-led Class Proposal

Leader: _____ Date: _____

Home Phone: () _____ Work Phone: () _____ Cell/Pager: () _____

E-mail Address: _____

Class/Activity Title: _____

Please write a 25-50 word description of your class (description will be used for promotional materials):

1. Length of each session: (ex. 1 time only, 8 wks, 10 wks, ongoing activity, etc.) _____

2. Length of each class: (ex. 1 hour, 90 minutes, etc.) _____

3. List number of classes per month/week: (ex. once a month, twice a week, etc.) _____

4. Preferred day of the week and time: _____

5. Second choice day of the week and time: _____

6. Min/Max **NUMBER** of students: _____

7. List the main things you expect people to learn or do after participating in your class/activity:

8. List the main things and activities you plan to do to help participants during your class/activity:

9. Briefly describe how you want the room set up (tables, chairs, AV equipment, etc):

10. List the things you will provide for the participants to facilitate their learning:

11. List the things you would like the Friends of OASIS or the OASIS Senior Center to provide for the participants:

Signature

Date

Return form to:

OASIS Senior Center
Attn: Jennifer Sisoev/Volunteer Led Class Proposal
801 Narcissus Ave, Corona del Mar, CA 92625
FAX: (949)640-7364, Email: jsisoev@newportbeachca.gov