

## Friends for Learning Instructor & Course Information Sheet (CIS) Rev. 9

Date submitted: \_\_\_\_\_

**Contents of this form will appear in the Course Catalog.**

**Please provide information that is clear, accurate, and concise.** (If absolutely necessary, attach separate sheet.)

If possible submit this form electronically. (This form is editable.) **Adobe Reader XI, or later is required.**

Please download the form, fill in all blanks, Save as (TITLE CIS), and send to [terphyl@gmail.com](mailto:terphyl@gmail.com).

Please use the pdf version of this file from the FFL website.

Or, fill out by hand and mail. (\* See address below.)

<b>Course #</b> _____ <i>Office use only</i>	<b>Course Title:</b> <i>(Limit to 40 Characters.)</i>	<b>Student Fee:</b> <i>(if any)</i>
<b>Instructor:</b> <b>Email:</b>		<b>Phone:</b>
<b>Facilitator:</b> <b>Email:</b>		<b>Phone:</b>
<b>Instructor's preferred Date(s):</b> <b>Day of Week:</b> <input type="checkbox"/> Mo <input type="checkbox"/> Tu <input type="checkbox"/> We <input type="checkbox"/> Th <input type="checkbox"/> Fr	<b>Time:</b> <b>Number of sessions:</b> <b>Session length:</b> <i>(1, 1.5 or 2 hours)</i>	<b>Location:</b> <i>(Address if not at ISU)</i>

**Content and description of class.** *(Please use 3-4 complete sentences)*

  
  
  
  
  
  
  
  
  
  

**Field trip(s):** Yes

**Number of students allowed in class: Maximum:** \_\_\_\_\_ **Minimum:** \_\_\_\_\_

**Instructor's credentials** *(pertaining to this class):*

  
  
  

**Equipment and materials required for class**  
Microphone PC Handouts Overhead Projector (Elmo) Pointer Other:

**Additional information/comments:**

  
  

<b>Office use only</b>	<b>Class Day of week:</b> <input type="checkbox"/> M <input type="checkbox"/> Tu <input type="checkbox"/> Wed <input type="checkbox"/> Th <input type="checkbox"/> F	<b>Date(s):</b>	<b>Time:</b>	<b>Location:</b>
	<b>Class date/day/time approved by instructor:</b> <input type="checkbox"/> Yes			
	<b>Comments:</b>			
<b>Scheduled with ISU:</b> <input type="checkbox"/> Yes				
<b>Comments:</b>				

\*Using your normal email, send this form (as an attachment) to [terphyl@gmail.com](mailto:terphyl@gmail.com). Or mail to Phyllis Arrington, 210 N. Hanson, Shelley, ID 83274 Phone 208 403-9365