Friends for Learning. Inc. **Instructor & Course Information Sheet (CIS) Rev. 10**

Date submitted:

- •This form is editable with Adobe Reader XI or later.
- •Please download the form and fill in all blanks except those shown in gray.
- •When finished, go to "File", "Save as", give the form a name (e.g. the title) and save.
- •Attach the CIS to an email and send to fflcurriculum@gmail.com
- •Or make a copy of the form, complete it by hand and mail. (See address below.)

•Contents of this form will appear in the Course Catalog so be sure the information is clear, accurate and concise.							
	ourse # Course Title: (Limit to 40 Characters.) fice use only					t Fee: (if any)	
Instructor: Email:					Phone	Phone:	
Facilitator: Email: Phone:							
Instructor's preferred Date(s): Time: Session length: (1, 1.5 or 2 hours) Logoromy (1, 1.5 or 2 hours)						Location: (Address if not at ISU)	
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 Pointer Internet Other:							
Additional information/comments:							
Office use only	Class Day		Date(s):	Time:	Location:		
	Class date/day/time approved by instructor as verified by facilitator: Yes Comments:						
	Scheduled with ISU: Yes Comments:						

^{*}Using your normal email, send this form (as an attachment) to fflcurriculum@gmail.com. Or mail to Phyllis Arrington, 210 N. Hanson, Shelley, ID 83274 Phone 208 403-9365