Friends for Learning, Inc. Course Information Sheet (CIS) Rev. 12 Date submitted:

- This is a fillable form that can be completed on the computer.
- Contents of this form will appear in the Course Catalog so be sure the information is clear, accurate and concise.

Course #	Course Title	Iı	Instructor		Fee		
When:				Where:			
Course Description	on:						
Credentials:							
FFL Facilitator:		E-mail:		Phone:			
Instructor:		E-m	oil:		Phone:		
ilistructor.		E-III	an.		Filone.		
Instructor's preferred Date(s): Time: Day of Week: Mo Tu Wed Th Fr			Number of sessions: Session length: (1, 1.5 or 2 hours)	Location: (Address if not at ISU)			
Field trip(s)? Number of students allowed in class: Maximum: Minimum:							
Equipment and m	aterials required for class	1	nead Proiector Poi	nter	Internet Other		

When you complete the form, go to "File", "Save as", give the form a name (e.g. the title) and save.

Using your preferred email, send the completed form as an attachment to: fflcurriculum@gmail.com.