



Proposal Form ILR Workshop, Trip or Event

Activity: _____

Name of Facilitator: _____

ADDRESS _____

PHONE (____) _____ E-MAIL _____

SOC SECURITY # _____ BIRTHDATE _____
MONTH DAY YEAR

IF AN EMERGENCY INVOLVING YOU OCCURS DURING THIS EVENT, WHOM SHOULD INFORM? (PREFERABLY A RELATIVE)

Name: _____

ADDRESS _____

PHONE (____) _____

Attach a Brief Bio (50 words or less). Your Bio will appear in the ILR class catalog. (Warning: due to space limitations, any Bio over 50 words will be edited for length.)

Attach a Description of the event/trip/activity (50 to 100 words). Please include what participants will see, experience or learn during the activity. A description will appear in the ILR class catalog: may we edit it, or do you want it printed exactly as written? (Warning: due to space limitations, any description over 100 words will be edited for length.)

Okay to edit it _____ Please print as submitted _____

Length of activity/event/trip (how many hours?) _____ # of participants: **Maximum** _____ **Minimum** _____

Earliest possible date for event: _____ Latest possible date for event: _____

We usually schedule trips and other one-time activities on **FRIDAYS**. Saturday also is possible. For you, what are the acceptable day(s) of the week (circle all that apply).

Fri Sat Other _____

Acceptable location(s) (check all that apply) _____ **Slippery Rock** _____ **SRU's North Hills site** (Wexford)
_____ **other** (where? _____)

If a standard classroom is not adequate, what type of instructional space is needed?

What A/V equipment from SRU will be needed?

For **TRIPS**, sometimes we meet somewhere and carpool, and sometimes we hire a bus or van

_____ Hire a bus or van

_____ Participants **Rendezvous** at _____

continue on other side

Materials, supplies, food the facilitator will provide and their approximate cost:

Materials, supplies, food or transportation the ILR will need to provide and their approximate cost:

Textbooks, materials or supplies each participant needs to provide:

Approx. cost of these items _____ Where the items can be obtained _____

We welcome proposals at any time.

**Specific plans for ILR classes & events are developed
during the following timeframes:**

Fall classes - April thru early June

Spring classes - October thru Early December

Please complete this form as fully as you can and sent it to:

PLEASE TAPE OR STAPLE CLOSED

PLEASE PLACE STAMP HERE

Institute for Learning in Retirement
Center for Lifelong & Com'ty Learning
165 Elm Street
Slippery Rock, PA 16057