



Seminar Proposal Form

Proposed course title: _____

Length of course: _____

(i.e., how many weekly sessions, each being 2 to 2.5 hours including a 15- to 20-minute coffee break at each session)

Likely time frame for course (e.g., Fall 20XX, Winter/Spring 20XX) _____

Brief description of the topic and proposed presentation:

Suggested reading (*optional*): _____

Summary of presenter's qualifications, expertise, or particular interest relating to the topic, as well as any previous experience as a VISTAS presenter:

Submitted by:

Name: _____ Date: _____

Phone: _____ Email: _____

Snail mail: _____

Fill out this form and mail it to:

VISTAS Lifelong Learning
Attn.: Curriculum Committee
P.O. Box 23228-3121
Santa Barbara, CA 93121

OR

Summarize this information and email it to:

VistasCurriculum@gmail.com

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