



Study Group Proposal Form

Thank you for your interest in leading an OLLI study group this winter/spring! Please complete the following form and submit it to the OLLI office ***no later than October 26, 2018***. You are welcome and strongly encouraged to submit your proposal earlier!). We will respond to your proposal within the next two months. Please note that we will try to accommodate your requests for dates, times and location of your course, but we cannot guarantee your first choice. Please be as flexible as possible when suggesting dates, times and location.

Proposals can be submitted via U.S. mail to the address above or via email to: ribenjam@umich.edu.

Proposed Study Group Title _____

Your Name
Address
Phone
E-mail

Description of Event for Catalog:

Please describe your study group, including: what participants will get out of this study group, general topics to be covered, teaching format (discussion, lecture, etc.), any reading materials to be purchased by participant, any course materials required, etc. Include 1-2 sentences about yourself and your background as it relates to the course topic.

Please limit to 100 words or less.

Format (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Lecture | <input type="checkbox"/> Demonstration |
| <input type="checkbox"/> Readings | <input type="checkbox"/> Discussion |
| <input type="checkbox"/> Active participation | <input type="checkbox"/> Visual media viewing |

How often will this class meet?

- Once a week
 Other (specify) _____

How many times will this class meet? _____

How many hours will each class meeting last?

- 1.5 hours
 2 hours
 Other (specify) _____

Please continue on pg. 2

Do you need set up time? Yes No If so, how much? _____

What is your preferred **start date** (earliest start date - 1/21/19)? _____ No preference

What is your preferred **end date**? _____ No preference

What are your preferred **days of the week**?
(check all that apply; please be flexible)

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- No preference

What is your preferred **time of day**?

- Morning
- Early Afternoon
- Late Afternoon
- Evening (dependent upon availability)

What is your **minimum** number of participants? _____

What is your **maximum** number of participants? (not to be exceeded) _____

Are there any prerequisites for the participants? Please describe: _____

Venue request:

- No preference
- Bank of Ann Arbor (Plymouth Rd.)
- Brecon Village (Saline)
- Brookhaven Manor
- Church of the Good Shepherd
- First Presbyterian Church
- Jewish Community Center
- Saline Senior Center
- Sanctuary at St. Joe's Village
- Temple Beth Emeth/St. Clare's Church
- Trinity Lutheran Church
- Turner Senior Resource Center
- UM North Campus Research Complex
- University Commons
- Other (specify) _____

Audio-visual equipment needs:
**Study Group leaders must bring their own laptop if one is needed*

- TV/DVD
- Projector
- Speakers (for projector)
- Screen
- Hearing Loop
- Wireless Internet Access
- Other (specify): _____

Have you previously taught an OLLI course? Yes (Please specify years and course names) _____

 No

Are you interested in attending a Group Facilitation Training seminar on December 7? Yes No

How did you hear about leading an OLLI study group?

- Flyer seen elsewhere (specify where) _____
- Email
- OLLI website
- Friend/acquaintance/OLLI member
- Flyer seen at a lecture
- Other (please specify) _____

Any questions? Please contact: **Ben Richards, OLLI Assistant Director**
OLLI at the University of Michigan
A program of the Geriatric Center
ribenjam@umich.edu 734-998-9357

