

## Instructor Information Sheet

Name \_\_\_\_\_ Best way to contact you \_\_\_\_\_

Proposed Class Title(s) \_\_\_\_\_

\_\_\_\_\_

Briefly describe your background and how it pertains to teaching this subject:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current Teaching Experience: Have you taught this class before? If so, where, and how many students do you typically get? What else do you teach? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What else do you teach? \_\_\_\_\_

What other important details should we know about you? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Please include with your Course Proposal form(s), and return this form to:**

*West Los Angeles College Community Services 9000 Overland Ave. Culver City, CA 90230*

*Phone (310) 287-4475*