OLLI Workshop Leader Application - Spring 2016

Please complete the ENTIRE application. This will help our staff provide you with the best possible scheduling and classroom solution. When completed, submit the application to the OLLI Office, Room S-101 in SBS, no later than Friday, October 30, 2015. Or mail to OLLI • Social & Behavioral Sciences Building, Stony Brook, NY 11794-4310

Any questions, call the OLLI office at 631-632-7063 or contact: OLLIcurriculum@stonybrook.edu

* Required

Workshop Information

1. Workshop Name: * Avoid titles that begin with "A" or "The".

2. Workshop Subject: * Which subject heading would you use for this workshop? Select one.

   - ☐ Arts
   - ☐ Computer Science
   - ☐ Current Events
   - ☐ Finance & Business
   - ☐ Game Theory & Sports
   - ☐ History & Politics
   - ☐ Languages
   - ☐ Literature & Writing
   - ☐ Music
   - ☐ Philosophy & Psych.
   - ☐ Photography
   - ☐ Religion
   - ☐ Science

3. Workshop Description: * NOTE: THIS DESCRIPTION WILL BE PUBLISHED IN THE COURSE CATALOG; it should be no more than 75 words. Even if there is no change, you must write in or attach the workshop description. ● Please include any workshop trips you plan to take. All workshop trips must be coordinated with the OLLI office. ● If you are using the GREAT COURSES, include how much time will be spent each session watching the DVDs.

4. Has your workshop been offered before?*

   - ☐ NEW OFFERING: Requires a 3 minute presentation to the Curriculum Committee on Wednesday, November 18, 2:30 PM, SBS 244 JOB Conference Room.
   - ☐ REPEAT: Same CONTENT as the last time the workshop was offered.
   - ☐ CONTINUING: Same TOPIC, NEW MATERIAL, taking up where last semester left off.
5. Was your workshop offered last semester?
☐ Yes  ☐ No

Workshop Leader

6. Primary Leader *
First Name__________________________ Last Name______________________________
Email__________________________________________ Telephone_________________

Optional Co-leader:
First Name__________________________ Last Name______________________________
Email__________________________________________ Telephone_________________

If more than 1 co-leader is needed, you must state reason below to get approval from the Curriculum Committee.

_______________________________________________________________
_______________________________________________________________
_______________________________________________________________

Schedule

7. Schedule Preferences *

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30 am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10:00 am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11:30 am</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2:30 pm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please indicate your 1st, 2nd, and 3rd choice of day of the week and time period you would like to start your workshop by writing the number “1”, “2”, or “3” in the appropriate box in the table above. Each time slot is 75 minutes.
8. Do you need extra time?
If you need more than 75 minutes please check the box below and explain why. Workshops scheduled for the last time slots can run for 2 hours, from 2:30 to 4:30. If you need 2-1/2 hours, you can request two consecutive time slots, although the extended time cannot be guaranteed. We will do our best to accommodate you bearing in mind that rooms are scarce on Tuesdays & Thursdays.

☐ I need more than 75 minutes for my workshop.
_______________________________________________________________

9. Alternate Start Dates and Cancelled Meetings
OLLI's 2016 Spring Semester workshop schedule will begin mid-late February. Actual start/end dates TBD. Please note any specific start or end dates (i.e. "mini workshop) in the space below. Also, let us know if you must cancel any meetings.

_______________________________________________________________

10. Do you wish to put a limit on the size of your workshop? * Workshop limits may not be set for less than 25 and are normally determined only by the size of the assigned room.

☐ Yes  ☐ No
If yes, what size and why must there be a size limit? ____________________________________________

11. Audio Visual Equipment *
Define your weekly needs for audio visual equipment. If the item you need is not listed or if you have any special audio visual equipment needs, select "Other" and explain those special needs in the space provided. You or an assistant must become familiar with its operation. Training can be provided. Occasional audiovisual use requires 2 weeks notice to OLLI office, by email or in writing. Check all that apply.

☐ None  ☐ DVD Player  ☐ Other: ________________
☐ Projector  ☐ CD Player  ☐ Microphone
☐ Internet Connection  ☐ Computer  ☐ Other: ________________

Special Organization of Room: *
In order to provide you with a room that you can set up the way you need, let us know what your requirements are. Do you have any special requirements, such as tables & chairs, chairs only, chairs in a circle...

☐ Yes  ☐ No  If yes, explain. ____________________________________________
Review

Please review your form responses carefully, then enter your name and any additional information or comments you wish to add.

13. **Prepared by:** Enter the name of the person who prepared this form.

_____________________________________________________________________________

14. **Additional information:** Add any comments pertaining to your workshop application which are not covered on the form.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________