

CENTER FOR CRAFT & APPLIED ARTS

Teaching Proposal Form

Title of Workshop: _____

Name of Instructor(s): _____

Is this a (check one):

Multi-week class

Weekend Workshop

One Day Workshop

Maximum number of students in class: _____

Material fee per student: _____

Total cost per student: _____

What are the dates and times of the class? (i.e. Tuesdays, 6-9pm, August 25-September 29):

Location of class (include name of building and full address):

Description of class (include techniques to be covered and student outcomes):

Instructor biography and studio or business affiliation if applicable:

Please attach 1-5 relevant images in .jpg format to illustrate your class listing.

Submissions and questions can be sent to the CCAA education coordinator through email at info@CCAdetroit.com. For additional questions you may call Gabriel at (313) 559-2237.