Course Proposal Request
Professional & Continuing Education

Western Oregon UNIVERSITY
College of Education

Course Title: _____

Request Level: ☐ ED 638 (30hrs of instruction/student work = 1 graduate credit, A-F grading)
☐ ED 805 (10hrs of instruction/student work = 1 graduate CEU credit, P/NC grading)

Meeting Address: _____

City: _____ County: _____

Primary Instruction Method: ☐ Face-to-Face ☐ Online ☐ Hybrid

Number of Credits: _____
($80 per credit)
Estimated Enrollment: _____

Course Begins: _____ Final Coursework Due: _____

Total Hours of Direct Instruction: _____ Total Hours of Work Outside of Class: _____

Details:
Meeting Date(s) and # of hours

Details (List assignments, homework, etc.):
Activity and # of hours

Note: Above information must be clearly indicated on course syllabus.

Course Payment Method: ☐ Student's Paying
☐ Third Party (**must be 3 credits or higher, & enrollment of 12 or more students**)
If 3rd Party Pay - contact's name & email _____

Instructor Information:

Name: _____ Phone#: _____
Email: _____ Affiliation: _____

☐ Instructor holds a graduate degree ☐ Instructor has expertise in the content area.

Please email completed form, along with Course Syllabi and Resume to partnerships@wou.edu