



CENTRAL WASHINGTON UNIVERSITY

**CENTRAL WASHINGTON UNIVERSITY
COURSE PROPOSAL FORM
A Continuing Education Unit (CEU) Program**

Organization Name:	
Contact Name:	Telephone Number
Address:	
City:	State: Zip:
Name of Course:	
Dates and Times:	# of CEU to be awarded:
Instructor(s) and qualifications	
Facility for course:	Materials and equipment necessary:
Course Description (25 words or less)	
Topical Outline:	

Learner Outcomes (3-5 per CEU):	Assessment:
1. Participant will	
2. Participant will	
3. Participant will	
4. Participant will	
5. Participant will	

Please attach a copy of the student evaluation form you will be using for this course. Include the form you will be using to summarize these course evaluations.

Submit proposal to: CWU Office of Continuing Education
400 E. University Way
Ellensburg, WA 98926-7433
Fax: 509-963-1690
Email: FoyG@cwu.edu