

Oxford Community Center

Instructor Proposal

Please complete this form and send it, along with your resume and any references, portfolio, etc. that you feel may be helpful, to:

**Program Manager
Oxford Community Center
4 Maple Road
Oxford, MA 01540**

Date:

Instructor Information:

Class Start Date (proposed): _____

Name:

Class Name:

Address:

Duration (weeks):

Number of Classes:

Minimum Enrollment:

Phone:

Maximum Enrollment:

E-Mail:

Student Age Group

Class Description:

Equipment Needed (desks, tables, chairs, etc):

Class Materials (e.g., notebooks, pens, art supplies, etc.):
