

CREATIVE INDUSTRIES OF GREENE COUNTY
Education Committee
Instructor Course Application

INSTRUCTOR

Name _____

Address _____

Day Phone _____ Evening Phone _____

Email _____

Instructor Qualifications

COURSE TITLE

Adult class 19>

COURSE DESCRIPTION

- Class size (not more than 12)
- Course total hours
- Hours per session
- Day requested to teach
- Time requested to teach

COST

Set-Up Request

Signature

Date

*Please submit to Education Committee, CIGC, PO Box 129
Waynesburg, PA 15370, ATTN: Pam Abbe*

CREATIVE INDUSTRIES OF GREENE COUNTY

CLASSES/WORKSHOP SURVEY

CIGC intends to offer workshops and classes beginning January 2010. Please assist us in identifying areas of interest in these educational opportunities.

CHECK AREAS OF INTEREST:

AGRICULTURE

(indicate specific areas)

ART; The Business of Art

BASKETRY

CREATIVE WRITING

ENTREPRENEURSHIP

FIBER ARTS

FLOWER ARRANGEMENT

FOOD (indicate specific area)

GENEOLOGY

HORTICULTURE

HUMANITIES

(specify)

OTHER

JEWELRY MAKING

LANDSCAPE DESIGN

PAINTING

Oils

Watercolor

Other

PERFORMING ARTS

PHOTOGRAPHY

POTTERY/CLAY

MUSIC

Adult

Children

SCIENCE

(specify)

SCULPTURE

TRADEMARKING

NAME

ADDRESS

PHONE

EMAIL

Are you interested in teaching a class/workshop?

YES

NO

Please return to CIGC, PO Box 129, Waynesburg, PA 15370
createpa.org