

Compton College Professional Development Activity Proposal Form

If you are planning an activity and want to offer Flex Credit, please complete this form and return it to the Flex Coordinator via email to professionaldevelopment@compton.edu. For more information regarding eligible categories and approved activities, please review the attachment, "Professional Development Categories and Approved Flex Credit Activities".

All Fields Are Required.

CONTACT INFORMATION (If case there are questions regarding the proposal.)

Name: _____ Email: _____

Phone / Extension: _____

PROPOSED ACTIVITY

Activity Title: _____

Description for intended participants (You may be required to submit additional information for approval.):

What FLEX category does the activity satisfy? (See the attachment for a list of categories.) _____

Date of the Activity: _____

Start Time: _____

End Time: _____

Length of the Meal Break (if it is within time above or N/A): _____

Location/Room: _____

Intended Audience:

All Faculty Classified Staff Managers and Supervisors

A Specific Group: _____

Maximum Number of Attendees/Participants (or No Limit): _____

PRESENTER INFORMATION

Presenter's Name:

Presenter's Affiliation (Full-Time Faculty / Adjunct Faculty / Other):

Name(s) and Affiliation(s) of Co-Presenter(s) (or N/A):

NOTES:

Do you have any special instructions or requests? Please list additional dates if this activity will be offered multiple times or is part of a series.
