



DISCIPLESHIP COURSE PROPOSAL

Leader Name		
Leader Email		
Leader Phone	Daytime #:	Alternate #:
Name of Course		
Week Day		
Beginning & Ending Dates		
Beginning & Ending Times	Sunday: <input type="checkbox"/> 4:30-5:25 p.m. <input type="checkbox"/> 6:45-7:45 p.m. Wednesday: <input type="checkbox"/> 6:30-7:30 p.m. <input type="checkbox"/> Other: _____	
Course Participation	<input type="checkbox"/> Discipleship Class will remain open for the entire quarter <input type="checkbox"/> Discipleship Class will close to new attendees after 3 weeks <input type="checkbox"/> Discipleship Group (limited to pre-selected group members)	
Course Textbook(s)	Title / Author / ISBN Number-usually on back of book	Number of books requested:
	<input type="checkbox"/> Books to be ordered by Discipleship Ministries <input type="checkbox"/> Books to be ordered by:	
Course Description		
Room Set-up	<input type="checkbox"/> Circle of chairs <input type="checkbox"/> Bible Fellowship – rows of chairs <input type="checkbox"/> Other	Special Instructions:
	Number chairs needed: Number tables needed:	
Equipment Needs	<input type="checkbox"/> Overhead Projector <input type="checkbox"/> PC Projector <input type="checkbox"/> TV/VCR <input type="checkbox"/> TV/DVD <input type="checkbox"/> Podium <input type="checkbox"/> Table for materials <input type="checkbox"/> Other	