

CVQ PROGRAM / WORKSHOP PROPOSAL FORM

Submitted by:

Date

Email:

Phone:

____ Program title:

____ Workshop title:

General Description:

Teacher / Leader Name

City / State of Residence

Email:

Phone:

Website:

Other social media:

Is teacher available to work on Zoom? _____ Yes _____ No

What is the cost?

How many people can attend?

Is the session taped for later viewing?

Does the teacher require purchase of pattern, book or other materials in addition to cost of class?

Does the teacher have videos available for viewing on You Tube?

Have you looked at any reviews of this teacher?

When are they available?