

COURSE DETAIL SHEET 202X

Class Code

Room

Tutor 1

Name

Phone

E – mail

Address

Postcode

Tutor 2

Name

Phone

E – mail

Address

Postcode

Course

 Ongoing

 Short

Number of sessions

Title

Synopsis

Please give a brief description of content or activities

 Indicate if there any **prerequisites** for class members:

art materials, text books, necessary standards for games, languages, IT, physical fitness etc.?

Schedule

Choice

Start date

Finish Date

Week day

Start Time

Finish Time

1.

2.

Notes

Participants

Min

Max

Admittance after course has started?

 Yes

 No

Media

Which of the following media will you be using?

 USB - stick

 CD

 DVD

 Blu - Ray

 VHS - tape

Will you be using your own equipment?

 No

 Yes

Please specify: