

Bucks County Community College

Swamp Road Newtown, PA 18940 Continuing Education (215) 968-8409 Kids On Campus (215) 968-8411



KIDS ON CAMPUS

Camp Proposal Form

Please complete and return this form to the Kids on Campus Office for <u>each</u> camp you wish to teach. If you have a particular preference for camp dates, please indicate so. If your dates are flexible, please list preferred weeks. We will contact you to confirm dates when your camp is approved.

NA	ME OF CAMP:
Da	te:
Ag	es of Students:
NA	ME OF INSTRUCTOR:
Ch	PHONE: (Cell) (Work) (Home)
ADI	DRESS: EMAIL ADDRESS:
Ca	mp Description/Summary:
	Is there a materials fee for participants? If so, how much?
2.	List exact material participants will receive for this fee (Duplicated handouts may not be included; these are copied through the Continuing Education Office.
4.	List any special room, space or equipment/preference, and specific dates needed:



KIDS ON CAMPUS PROGRAM OUTLINE

Camp Learning Outcomes (identifies knowledge and/or skills students can expect to acquire upon completion of camp – A separate sheet may be attached, if necessary):

Camp Topical Outline (a planned daily sequence of topics or learning activities for each day designed to help students achieve the learning outcomes – a separate sheet may be attached if necessary):	
Monday:	
Tuesday:	
Wednesday.	
Thursday:	
Friday:	