

Core Communication and Couple Communication I & II INSTRUCTOR WORKSHOP APPLICATION For College/University Professors

To attend a complimentary workshop (and receive adoption review materials there) – please provide the following information (please print or type):

Workshop Choice (location):		Dates I wish to attend:	
My interest is with the course material for:	___ Individuals	___ Couples	Or ___ Both

Applicant Information:

Name:		Position:	
School:		Department:	
Address:		City/State/Zip:	
Office Phone:		E-Mail Address:	
Office Hours:			
Course Title (for adoption consideration) and Number:			
Annual Enrollment:	Course Start Date: / /	Course Offered: ___ Fall ___ Winter ___ Spring ___ Summer	
What text(s) are you using now?			
Text:		Author:	
What, if any, experience do you have with interactive-experiential teaching?			
What does your department currently offer as unit, lab, or course in applied communication skills?			

If there is a need for more than one professor to teach several sections, do you know of another faculty colleague who would also like to attend the workshop with you? ___ Yes ___ No

If so, please enter his or her name, phone number, and e-mail address and we will contact the person(s).

Adoption decision made by: ___ Myself alone ___ Committee ___ Someone other than myself

Text Decision Date: / /

Please list names:

I have discussed the workshop and possible adoption with my department chair and he/she supports my attendance at this workshop to receive training and consider adoption of these materials.

Name of Department Chair: _____

Signature of Department Chair

Date

Signature of Applicant

Date

Please contact ICP if you have any questions about the scholarship, training, materials, etc.

Ph: 800-328-5099 / 303-674-2051 or E-Mail: icp@comskills.com

www.comskills.com or www.couplecommunication.com

Please Mail or Fax this application to:

**Interpersonal Communication Programs, Inc.
30772 Southview Drive #200
Evergreen, CO 80439
Fax: 303-674-4283**