



## Osher Lifelong Learning Institute

### STUDY GROUP PROPOSAL FORM

**Dear Prospective Study Group Leader:**

***As you prepare this proposal, we may remind you that all Osher LLI courses are predicated on peer learning. We thank you for your interest in proposing an Osher LLI study group. All prospective study group leaders must complete this form and provide a syllabus for the proposed study group. Completed proposals are reviewed; subsequently, this information is used to develop a schedule. Therefore, complete information is essential. If you would like assistance in completing the form or have any questions, please contact Marilyn Blumsack, Director, at 617-627-5885. A sample proposal form is also available upon request. Completed forms should be mailed to Tufts University Osher Lifelong Learning Institute, 039 Carmichael Hall, Medford, MA 02155 or faxed to 617-627-6507.***

**Thank You**

**Date Submitted:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Title of proposed study group:** \_\_\_\_\_

**Term:** \_\_\_\_\_; **Year:** \_\_\_\_\_;

**Time Preference:**

Morning (10:00-12:00) Monday, Wednesday, or Friday

Afternoon (1:30-3:30) Monday, Wednesday, or Friday

Evening (4:00-6:00) Monday, Tuesday, Wednesday, Thursday, or Friday

**Textbook or Other Resource** *(must be currently available)*

Author &amp; Title: \_\_\_\_\_

Publisher &amp; edition: \_\_\_\_\_

ISBN#: \_\_\_\_\_ Price: \_\_\_\_\_

**1. Biographical Information:** Prospective study group members are always interested in the background and interests/accomplishments of study group leaders. Briefly tell us about your background including your particular interest in the topic(s) you plan to share with study group members. Although not a requirement, let us know if you have previously led a study group? If so, when and where? (Needs to be completed only if there have been significant changes).

**2. Syllabus:** How do you intend to use the eight weeks of the course in terms of reading assignments, topics to be explored and study group member's presentations, if any?

**3. Description:** This information is required for publication in the brochure. Using the information you have provided under terms #1 and 2, tell us how you would like your study group to be described in print. Include content, modes of participation and expectations.

**4. Special Requests:** Please let us know if you have any special requests, including equipment in conducting the study group.

**5. Comments:** Please feel free to include additional thoughts or ideas you wish to share.

**PLEASE RETURN THIS FORM TO:**

**Marilyn Blumsack, Director  
Tufts University  
Osher Lifelong Learning Institute  
039 Carmichael Hall  
Medford, MA 02155  
Phone: 617-627-5885  
Fax: 617-627-6507  
Email: [Marilyn.Blumsack@tufts.edu](mailto:Marilyn.Blumsack@tufts.edu)**