



Marlborough Public Schools

17 Washington Street, Marlborough, MA 01752
(508) 460-3509

Mini-Course Proposal

Program Title:

Course Name:

Brief Description: (No more than 1024 characters)

Start Date:

Start Time:

End Time:

End Date:

Location: Building:

Room #

Hours of Course:

Booked with office

Facilitator:

This information will be uploaded into TeachPoint

Mini-course catalog summary (include # of sessions, dates & times, and a **brief** summary of the mini-course for inclusion in the catalogue which will go out to the staff). Please also include a syllabus with your course. Proposals may incorporate a blended learning environment. Please note the product or evidence of completion that will be required at the completion of the course.

Course Name:

of sessions:

Dates & Time:

Location: Building

Room #

Booked with school office

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It is the policy of the Marlborough Public Schools not to discriminate on the basis of race, gender, religion, national origin, color, homelessness, sexual orientation, gender identity, age or disability in its education programs, services, activities or employment practices.



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Brief Description

Building space must be booked by the facilitator directly through the building office. Training title should be noted on the “purpose of use” line next to the wording “Mini-course”. Please attach a copy of the completed Building Usage form along with your course proposal. In the event that the course does not take place, The Office of Teaching and Learning will cancel the booking.

Focus Area:

Please obtain the approval of the appropriate building principal as well as subject area teacher leader or coordinator (*where appropriate*).

Principal _____
Signature Printed Name

Teacher Leader/Supervisor/
Director or Coordinator _____
Signature Printed Name

Please check one: I agree do not agree that this course may be videotaped for future professional development use.

Thank you for your continued efforts towards ensuring the success of all learners in our District.

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