

Seminar Proposal Online Form

Seminar Information

Seminar Title*

Title

Semeter to Be Offered*

Semester

Seminar Description (must be 150 words or less)*

Describe how you will connect your scholarship to the topic of the seminar.

Description

Instructor Information

First Name*

First

Middle Name

Middle

Last Name*

Last

Email Address*

email@uga.edu

Phone Number*

(555) 555-5555

Website

www.website.com

Street Address*

123 Street Address

City*

City

State*

State

ZIP Code*

12345

Your School/College*

School/College

Department (if applicable)*

Department

Tenure Status*

Tenure Status

Faculty Bio or Philosophy (must be 75 words or less)*

Please provide a biographical sketch, preferably written in the first person, that includes the area of your research that relates to your seminar.

Bio or Philosophy

Team-Teach

If you plan to team-teach the seminar, please provide the name of your co-instructor. Please note that a listed co-instructor must also be a tenured, tenure-track, clinical, or retired tenured faculty member.

Co-instructor Name