**Course information**

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| --- | --- |
| Proposed Name: |  |
| Proposed Date(s): |  |
| Proposed Time: |  |
| Course Description:  (What is the course about? Feature, benefit, meaning. Use [this guide](https://zurichcvs.sharepoint.com/:b:/s/hub/EcnJSUAX9zpAsoK3juVs3V8BseXgpvWe5nOZROj9NaOaVA?e=QViuX3).) |  |
| Course Contents:  (At least 5 bullet points, what the course will cover and participants learn.) |  |

**Course facilitator**

|  |  |
| --- | --- |
| Name, Surname: |  |
| Spiritual name: |  |
| Background:  (Tell course participants about yourself, what is your life’s history and achievements, qualifications achieved, including spiritual) |  |

Please upload this form along with facilitator(s) photo [here](https://www.zurichcvs.ch/course-application) or send to [info@zurichcvs.ch](mailto:info@zurichcvs.ch).