**Requesting teacher inputs**

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|  | **Requesting a teacher participation to an existing courses** |
| **Name of the Course\*** |  |
| **Teacher in charge**  **(Name and surname)\*** |  |
| **email of Teacher in charge** |  |
| **Faculty/ department** |  |
| **Short description of the training content and schedule** |  |
| **Language of the course** |  |
| **Duration of the course** |  |
| **Approximate timing of the year (Semester 2 ? Month?)** |  |
| **Size of the audience** |  |
| **Which Bachelor level?** |  |
| **Disciplinary background of students** |  |
| **IT solution proposed for this lesson** |  |
| **Other additional information that may help to implement a bilateral cooperation** |  |