U.S COAST GUARD AUXILIARY

NOTICE OF INTENT TO TEACH

PUBLIC EDUCATION COURSE

START DATE	TOWN WHERE COURSE IS GIVEN	COURSE NAME	# OF DAYS	FLOTILLA #	CONTACT PERSON	CONTACT PHONE #	STATE HELD	ZIP CODE	EMAIL ADDRESS	

LIST ALL CLASSES SEPERATELY. ALL OF THE ABOVE INFORMATION MUST BE PROVIDED IN ORDER FOR YOUR CLASSES TO BE POSTED ON THE INTERNET. EMAIL AND COST ARE OPTIONAL IF YOU DO NOT WANT THEM POSTED LEAVE THE FIELDS BLANK.

EMAIL THIS FORM TO michael.kaff@verizon.net

Questions call me (917) 952-7014

Do not scan this form as a JPEG and email it use either the “WORD of PFD” versions.

NAME OF PERSON FILLING OUT THIS FORM_____ PHONE #_____

DATE_____ FLOTILLA_____E-MAIL_____

mdk12-01 02/07