



Application for a New Interest Group

Working name for the Interest Group: _____
(The name may be changed during the approval process)

Write a brief description of the Interest Group: _____

Meeting Day (i.e. first Thursday of month) _____ **Time:** _____

Meeting Location: _____

Name of person making the proposal: _____

Phone: _____ **E-mail address:** _____

Date submitted: _____

What influenced you to propose this Interest Group (i.e. course, event, personal interest)?

Please be specific if you can. _____

Provide names and contact information for the Interest Group leader(s).

Other information which should/need be considered: _____

Continue on the back or on additional sheets if necessary

Submit completed form to the OLLI office for review.

Email to: olli@unl.edu

or mail to: Osher Lifelong Learning Institute
College of Education & Human Sciences
125 Human Sciences Building
PO Box 830800
Lincoln, NE 68583-0800.

For Committee Use only Reviewer: _____ Approved: Yes / No Date: _____

Interest Group Name of Record _____