

ElderCare of Alachua County

5701 NW 34 STREET
GAINESVILLE, FLORIDA 32653
PH 352/265-9040
FAX 352/265-9041

New Program Questionnaire

Thank you for your interest in providing a program at the Senior Recreation Center (SRC). Our goal is to provide engaging, beneficial and functional programming to support healthy and positive senior living. To help us better understand your objectives in providing a program, please answer the following questions. Thank you in advance for your participation and belief in enhancing the lives of the senior citizens in our community.

1. Name of Programs(s):

2. Description of program(s):

3. Instructor Information:

Name:

Employer:

Email:

Best Contact Number:

Please provide credentials related to program:

4. Which category does your program fall under?

- a. Health
- b. Social
- c. Nutrition
- d. Education
- e. Recreation

5. Length of program(s):

- a. 30 minutes
- b. 1 hour
- c. 2 hours
- d. 3+ hours
- e. Other:

6. How often do you plan to provide the program at the SRC?

- a. One Time
- b. Weekly
- c. Monthly

Disclaimer: The SRC will not accept programs with the objective of promoting a business for monetary gain.

ElderCare of Alachua County

5701 NW 34 STREET
GAINESVILLE, FLORIDA 32653
PH 352/265-9040
FAX 352/265-9041

d. Other:

7. Please provide three dates and times you are available to provide this program at the Senior Recreation Center:
8. How will the program you plan to provide benefit senior citizens?

Please submit your completed questionnaire to Nick Hauzer at Nhau0001@Shands.ufl.edu.

For office use only:

Program Confirmation:

- Program approved for the Senior Recreation Center: Yes / No
 - Date:
 - Time:
 - Room Location:
- Program approved for submission to PrimeTime Institute for consideration: Yes / No
- Program approved for rental: Yes / No

Disclaimer: The SRC will not accept programs with the objective of promoting a business for monetary gain.