

Distance Education Course Proposal Form

Course Title: _____ Prefix/Number: _____

Department: _____

Semester/Year Course will be: Developed: _____ Offered: _____

Instructor/Developer of Course: _____

Phone: _____ E-Mail Address: _____

Course Developer is: Full-time Instructor Adjunct Instructor
Other (Explain) _____

Additional Requirements Requested by the Instructor (Ex. First Right of Refusal)

Describe Course: _____

Please check and describe any anticipated needs for course development:

Software Explain: _____

Equipment Explain: _____

Videography Explain: _____

Photography Explain: _____

Clerical Assistance Explain: _____

Web Design Explain: _____

TO BE COMPLETED BY DIVISION CHAIRPERSON:

Full-time Instructor Developing Course:

will be granted One-Course Release Time for Development.

will be paid for Course Development at Time of Completion

Other arrangements have been made to compensate for course development; they are as follows: _____

Division Chairperson Approval: _____ Date: _____

Dean Level Approval: _____ Date: _____

President Level Approval: _____ Date: _____

For Distance Education Office Use Only: Date Approved Form Received: _____
Date Division Chair sent copy of Approved Form: _____ Sent Approved Form By: _____