

DIVISION OF EXTENDED STUDIES: DE COURSE OFFERING FORM

**SUMMER and FALL SUBMISSION DEADLINE: February 9<sup>th</sup>**  
**SPRING SUBMISSION DEADLINE: September 7th**

School/Department: \_\_\_\_\_ Chairperson: \_\_\_\_\_

Business Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Course Prefix & Number: \_\_\_\_\_ Section Number: \_\_\_\_\_

Course Name: \_\_\_\_\_ Credit Hours: 1  2  3  4  6  12

Term: SMI SMII DUAL FALL SPRING MINI SESSION I MINI SESSION II Year \_\_\_\_\_

Is the course developed for online delivery?  Yes or  No

If **NO**, please **STOP** and complete the [NCCU New Development Course Profile](#) Compensation for new course development is rendered after the Office of E-learning receives the new development course profile form, consults with the faculty member, review and approves the course for online delivery.

If **YES**, please continue to complete the DE Course Offering Form and submit to Extended Studies.

Is this a restricted course?  Yes or  No

If you answered yes, who is authorized for approval i.e Chair, Dean, Advisor? \_\_\_\_\_

State the last academic semester the course was offered: \_\_\_\_\_

Is this a Service Learning Course?  Yes or  No

Course Delivery Mode: Face-to-Face  Online  Teleconference

Site Location: VGCC  WTCC  Building: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_

1. Are you using Blackboard Collaborate for synchronous learning?  Yes or  No

• Required Bb Collaborate Log-On Day and Time: \_\_\_\_\_

2. Are you using WebEx for synchronous learning?  Yes or  No

• Required WebEx Log-On Day and Time: \_\_\_\_\_

3. What is the Equipment & Software requirement(s) for the student? \_\_\_\_\_

4. Are you requiring Proctored Exams for the course?  Yes or  No

5. Are you using Respondus Monitor?  Yes or  No

**Note:** Students must have a Webcam & Recorder to use Respondus Monitor.

6. Are you using LockDown Browser in the testing environment in Blackboard?[  Yes or  No

**Note:** Students are unable to print, copy, go to another URL, access other applications or close a test until it is submitted for grading.

EXTENDED STUDIES WILL NOT ISSUE FUNDING FOR AFTER THE FACT CONTRACTS. 9.12.17

**IF FORMS ARE SUBMITTED AFTER THE DEADLINE, PLEASE ALLOW 3-5 DAYS FOR PROCESSING.** Page 1

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- 7. Are you requiring students to utilize the Writing Studio? [ ] Yes or [ ] No
- 8. At any time, are students required to attend class on NCCU campus for the course?[ ] Yes [ ] No
• If yes, please list date, time and location \_\_\_\_\_
- 9. Are students required to attend class at an off-campus location for the course? [ ] Yes or [ ] No
• If yes, please list location (address, building and room #) \_\_\_\_\_

THIS SECTION MUST BE COMPLETED BY THE DEPARTMENT CHAIR and/or DEAN

Assigned Instructor: \_\_\_\_\_ Instructor Contact #: \_\_\_\_\_

Is the assigned instructor an Adjunct Faculty member? Yes [ ] No [ ]
If you answered yes, the academic department is responsible for initiating the Hiring Proposal via PeopleAdmin & securing DE funds.

Has the assigned instructor taught an online class at NCCU? [ ] Yes No [ ]

Does the instructor work full time for another state agency? Yes [ ] No [ ]
If you answered yes, the academic department is responsible for initiating the CP30 forms and securing DE funds.

Is the instructor a NCCU SPA employee? Yes [ ] No [ ]
If you answered yes, then please attach the EPA Employment of SPA Personnel Questionnaire Form & SPA Permanent Employees Teaching Class Guidelines and Form.

Is the instructor a 12 month employee? Yes [ ] No [ ]
If you answered yes, then please attach a letter of justification on why this employee is the only available faculty to teach the course.

Is this course an in-load for the instructor (full-time NCCU faculty)? Yes [ ] No [ ]

Is this course an overload (supplemental Compensation) for the instructor (full-time NCCU faculty)? Yes [ ] No [ ]
If you answered yes, the academic department is responsible for initiating the contract (HRPPA form) and securing DE funds.

Chairperson's Signature \_\_\_\_\_ Date \_\_\_\_\_

Dean's Signature \_\_\_\_\_ Date \_\_\_\_\_

Division of Extended Studies Assoc. Director's Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE RETURN COMPLETED FORMS TO
Division of Extended Studies, Attn: Paulette Morrison-Danner
H.M. Michaux, Jr., School of Education, Room 2051
Phone: 919-530-7442 Fax: 919-530-5220 Email: pscotton@nccu.edu

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Date Department Notified \_\_\_\_\_

Date Received \_\_\_\_\_ Processed By \_\_\_\_\_ Date Processed \_\_\_\_\_ CRN# \_\_\_\_\_