

Online/Hybrid/HyFlex Course Request Form

Who must complete this form: Faculty planning to teach online/hybrid/hyflex, regardless of previous online teaching experience.

Deadline: All forms should be submitted to your department head on or before August 1, 2020.

Directions: Montana Tech is committed to providing high-quality online instruction for our students. In order to ensure a consistent online experience faculty interested in offering an online/hybrid/hyflex course will be required to use the following:

- Moodle as their online delivery platform
- A syllabus (a template is available as an example of a “best practice” for online courses)
- Complete five(5) quality online learning and teaching workshops
- Complete one form for each course

Are you aware that the foundational platform required is Moodle? Yes No

Course Number, Title: _____

Section Number(s): _____

Course Credits: _____

Course Pre-reqs: _____

Have you offered this course online before? Yes No

If YES when was the last semester offered: _____

What was the method of delivery? _____

Which method do you plan to use for the upcoming semester?

Fully online (100%)

Hybrid /hyflex (less than 100% online)

Asynchronous/synchronous/both

If teaching synchronous, what will you do for students that are not able to attend?

Do you intend to teach from a: Classroom ___ Office ___ Home ___

Other: _____

What is your strategy for holding office hours? _____

Do you have the required equipment for online course delivery? Check all that apply:

- Computer
- Microphone
- Headset
- Camera
- High-speed Internet Connection
- Other _____

If not, list the equipment you will need _____

Academic integrity of a key tenant of higher education. Please describe how you are going to ensure the academic integrity of your course assessment tools (exams, quizzes, assignments, etc.) _____

I acknowledge that all of the information provided about my course is accurate and I understand that in order to teach an online/hybrid/hyflex course I will use Moodle, a syllabus and attend all required trainings/workshops.

Name Date

Department Head (Name, Signature) Date

Dean (Name, Signature) Date

Graduate Dean (Name, Signature) *only applicable if a graduate course* Date

Course: Approved Not Approved