Online Course Revision Proposal

Please complete this form and submit the prop be forwarded to the Distance Education Comm (email: <u>LuOnline@lamar.edu</u> or fax# 880-2191	ittee.
Department:	Submission Date:
Course Number/Title:	
Developer(s):	
Developer(s):	
Anticipated semester to offer revised course of Note: Course should be approved 3 months pri	nline: or to this date.
Proposed method of delivery:	(5-wk, 8-wk, 15-wk)
Delivery method: CDE (traditional onlin	e) AP(accelerated online)
Is revision money being requested? Yes	_No
What is the purpose of revising this course? (A	Attach details of changes)
or last revision and have demonstrated need ei with consistent student enrollment. It should in and learning objectives and should include upd department and the course. All redesigned cou Matters template. An instructional designer wi faculty member in updating content, applying t	
When was this course originally developed?	
Average enrollment	per section for last 2 years.
<u>Signatures</u> :	
Department Chair:	Date:
Dean:	Date:
Chair, Distance Ed Committee:	Date:
Provost	Date: