Office of E-Learning, Innovation, and Teaching Excellence (ELITE)
Course Development Program

The course development process for distance education and OER courses is outlined in the side letter agreement between the College and AAUP. Unless stated otherwise, the most recently negotiated agreement is the governing document as it relates to course development ESH.

Course development ESH requests should support the initiatives of the College's strategic plan and the Academic Master Plan. In addition, discipline and department alignment is expected.

To be considered for course development ESH, faculty must submit the completed request form to ELITE, with all signatures by November 15 (Spring), March 15 (Summer), or May 15 (Fall). Questions can be addressed to ELITE at dl@montgomerycollege.edu.

Expectations of faculty, criteria used in the course selection process and the support services provided by ELITE are outlined in the [side letter](). It is expected that submission of the signed ESH request form is indication of understanding the contents of the side letter.

When completing this information, you should TAB between fields. The fields will expand as you enter information.

Your Name: _____

Date Online Teaching Training Completed (if applicable): _____

Department Chair: _____ Dean: _____

Course to be developed:

      Semester for which you are requesting ESH: _____

      Course Title (eg ENGL 101): _____

      Is this course currently offered in a distance or OER format? Yes ☐   No ☐

      Delivery mode (eg Blackboard, Collaborate, OER): _____

      Number of ESH requested: _____

      Expected delivery semester for the first offering of the course: _____

      Number of distance and/or OER of this course offered collegewide for this current academic year: _____

      Number of enrolled students in those sections: _____

_____ --- I agree to develop and deliver the course identified above.
Faculty's Signature   Date

_____ --- I agree to the development and delivery of the course identified.
Department Chair's Signature   Date   This course falls within the Department goals.

_____ --- I agree to the development and delivery of the course identified.
Dean's Signature   Date   This course falls within the Unit and College goals and is
                                          acceptable from a staffing perspective.

When completed, return to: Office of E-Learning, Innovation, and Teaching Excellence, Mannakee Building, attn: Mike Mills

Do not write in this area - To be completed by the Office of E-Learning, Innovation, and Teaching Excellence
A signed copy of this form will be sent to the Faculty, Department Chair, and Dean.

This request has been reviewed and ☐ has been Approved   ☐ has not been Approved.

Reason if not approved: _____

_____

_____   _____
Vice President of E-Learning, Innovation, and Teaching Excellence   Account Number to enter on the PAF

7.10.23