Instructor: _____   **Date of Visit:** _____

Target Offering: _____   Completed Course Deadline:_____

Course: _____   **Past Meetings:** _____

First Day of Semester: _____   Chair Approval Deadline: _____

ONLINE COURSE CONTENT MODULAR COMPLETION CHECKLIST

Modules:

_____ **# of Modules -** modules based on   _____

Course Information:

Welcome _____	How You Will Be Evaluated
Contact Information	My Expectations
Overview _____	Campus Policies
Course Schedule	Student and Instructor Roles
Course Objectives	Strategies for Success
Course Readings & Materials	Your Next Steps...
Learning Activities	Ask a Question
Additional Content	

Icebreaker:

Overview _____

Introduce Yourself _____

Practicing Submitting an Assignment (@A G) _____

Practice Submitting an Assignment (Publisher) _____

Quiz on Course Information (@A G) _____

Quiz on Course Information (Publisher) _____

Ask a Question _____

Additional Content _____

Resources:

Syllabus _____

_____

Resource Links _____

Additional Content _____

Grading:

%		Total % Comments
_____		
_____		
_____		
_____		

Gradebook :

Categories

Assignments

Grading Scale

Additional

Special note: Course content needs to be completed {Insert Due Date}. If applicable, please complete course based on remarks above.

☐ Module Model:

Module at a Glance _____

    Overview _____

☐ Objective _____

☐ Readings _____

☐ Activities _____

Learning Content _____

    Instructor-authored

    Publisher-authored

    Multimedia, animations

    Other

Discussion Forums

Assignments _____

Tests/Quizzes _____

Ask a Question _____

Additional Info. _____

Module Component Summary:

Due dates:

Module-at-a- glance/Overview/Learning Objectives: ~~Complete~~/Incomplete
Lecture:
Discussion:
Assignments:
Project:
Quiz/Test :
Multimedia:
Interactive Material:

Modules:	1	2	3	4	5	6	7	8	9	10	11	12
Mod at a Glance												
Lectures (PPT)												
Discussions												
Assignments												
Videos/Games												
Assessments												

Please complete course based on remarks above.

Date of e-Visit: _____

Next e-Visit: _____

Tasks to be completed:*

Completed?   Yes   No   Pending

Submitted: _____ / _____

   Director of Online Education & Academic Technology   Date

Approved: _____ / _____

   Program Director   Date