1.	Name						
2.	TU Email						
3.	Office Phone						
4.	Depart	tment					
5.	College						
	College of Business and Economics						
	College of Education						
	College of Fine Arts and Communication						
	College of Health Professions						
	College of Liberal Arts						
	Fisher College of Science and Mathematics						
	Library						
	Other						
6. F	6. Professional Development that you have attended (Select all that apply)						
-		FACET Online & Hybrid Workshops					
		OAI Workshops (Online Edge or Gold Review)					
-		Quality Matters (APPQMR)					
		Other (Professional Development completed in the past 8 years; please upload documentation)					
		None					

7.	What course would you like to teach online?						
	a. Course Subject and Course Number (e.g., EDUC 731)						
	b.	Credit Hours					
	C.	c. Course Title e.g., Curriculum and Assessment					
Note: The course listed above must be already approved by the University Curriculum Committee.							
8.	3. Targeted semester and year						
9.	. Questions or comments? (Optional)						
Faculty Member s Signature				Date			
Dep	oartme	ent Chair s Signature		Date			

TOWNS