

**Lakeland  
Community College**

**ONLINE COURSE  
REQUEST FORM**

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*THIS PORTION TO BE COMPLETED BY INSTRUCTOR/DEVELOPER*

Date Requested: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Intended Publish Date (Semester/Year): \_\_\_\_\_ Copyright Clearance: \_\_\_\_\_  
(Please Initial)

Course Number/Title: \_\_\_\_\_  
**(Please attach official course outline to this form)**

Rational for Development:

Course Completion Deadline (Please Circle One)

April 1 (Summer)

May 1 (Fall)

December 1 (Spring)

**Instructor/Developer must assume responsibility that course will be completed by date circled above  
or course may not meet the intended publish date.**

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Department Vote: \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Abstentions \_\_\_\_ No Response

Instructor/Developer: \_\_\_\_\_ Date: \_\_\_\_\_

Division Dean: \_\_\_\_\_ Date: \_\_\_\_\_

V.P. for Academic Affairs: \_\_\_\_\_ Date: \_\_\_\_\_

V.P. for Technology: \_\_\_\_\_ Date: \_\_\_\_\_

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*THIS PORTION TO BE COMPLETED BY INSTRUCTIONAL TECHNOLOGIES*

Program Number: \_\_\_\_\_

Completion Date: \_\_\_\_\_ Publish Date: \_\_\_\_\_

User ID (online course): \_\_\_\_\_ Password: \_\_\_\_\_

Copies → Developer      Division Dean      V.P. for Academic Affairs      Instructional Technologies