ADDENDUM D
FORM DLC – Part 3

FACULTY NAME: ____________________________________________________________

DEPARTMENT: ______________________________________________________________

NAME OF COURSE AND CODE: _____________________________________________

SEMESTER COURSE WILL BE OFFERED: _______________________________________

COURSE IS ☐ FULLY ONLINE ☐ BLENDED

Course structure* is now complete, and the following certifications are made:

✓ Instructor has collaborated with Instructional Design and his or her academic department.

✓ Course complies with Open SUNY best practices and the Open SUNY Course Quality Rubric (OSCQR).

✓ Instructor has taken the Open SUNY Online Course Training.

✓ Payment will be made in the amount of $______________ to the Instructor for development of the course.

_________________________________________       _____________________________
Faculty Member                                      Date

_________________________________________       _____________________________
Instructional Designer                               Date

_________________________________________       _____________________________
Department Chair                                    Date

_________________________________________       _____________________________
Dean of Academic Affairs                             Date

* Subject matter content is the responsibility of the instructor, per Form DLC Part 2