



Online Course Evaluation

Submit this form for approval of totally online or hybrid/blended online courses

School Request

School: _____

Department: _____

Submitted By:

Print Name: _____ Sign Name: _____

Dean:

Print Name: _____ Sign Name: _____

Course Information

Course Name: _____ Course Number: _____

Section: _____ Semester: _____

Instructor Teaching the Course: _____

Designer of the Course: _____

Evaluated For: Hybrid/Blended _____ Totally Online _____

CTI Course Evaluation

	Need Improvement	Acceptable	Comment
Home Page			
Syllabus			
Content:			
Textbook			
Workbook			
Test/Quiz Review			
Assignments			
Resources			
Lecture:			
-PowerPoint			
-Streaming			
Discussion			
Dropbox			
Quizzes			
Grades			
Checklist			
Class Schedule			
Other			
General Comments			

Course Name: _____ Course Number: _____

Passed Requirements: Yes _____ No _____

For: Hybrid/Blended _____ Totally Online _____

Evaluator:

Dr. Ebrahim Soltani, CTI Director

Signature: _____ Date: _____

If Evaluated by a Committee:

Committee Member Name:

Print Name: _____ Signature: _____

Print Name: _____ Signature: _____

Approval from the Vice President of Academic Affairs:

Name: Dr. Clyde Montgomery

Signature: _____ Date: _____