

Uwe Müller, Herold 4/17/11  
03-466

# Undergraduate Distance Education Form

Part of the information requested on this form is required for your institution to be eligible for accreditation.

1. Institution Name: \_\_\_\_\_

2. Institution Address: \_\_\_\_\_

3. Institution Phone: \_\_\_\_\_

4. Institution Website: \_\_\_\_\_

5. Institution Email: \_\_\_\_\_

6. Institution Fax: \_\_\_\_\_

7. Institution Type: \_\_\_\_\_

8. Institution Accreditation: \_\_\_\_\_

9. Institution History: \_\_\_\_\_

10. Institution Mission: \_\_\_\_\_

11. Institution Vision: \_\_\_\_\_

12. Institution Values: \_\_\_\_\_

13. Institution Goals: \_\_\_\_\_

14. Institution Objectives: \_\_\_\_\_

15. Institution Programs: \_\_\_\_\_

16. Institution Faculty: \_\_\_\_\_

17. Institution Students: \_\_\_\_\_

18. Institution Services: \_\_\_\_\_

19. Institution Facilities: \_\_\_\_\_

20. Institution Financials: \_\_\_\_\_

21. Institution Governance: \_\_\_\_\_

22. Institution Quality Assurance: \_\_\_\_\_

23. Institution Research: \_\_\_\_\_

24. Institution Community Service: \_\_\_\_\_

25. Institution Internationalization: \_\_\_\_\_

26. Institution Sustainability: \_\_\_\_\_

27. Institution Innovation: \_\_\_\_\_

28. Institution Leadership: \_\_\_\_\_

29. Institution Culture: \_\_\_\_\_

30. Institution Reputation: \_\_\_\_\_

GRADUATE CURRICULUM AUTHORIZATION FORM

Check As Appropriate:

Level I  => New Program  or  Program Revision

Level II  => Degree Program Revision   Minor  COR

- Level III Minor Program Revision
- Application for COR Renewal
- Deletion  Course or Track  or Minor  or Program
- Variability in Program Delivery
- Program Reactivation
- New Course  => Enter **CIP Code** (Contact Registrar's Office): 150701
- Major Course Revision
- Minor Course Revision
- Dual-Level or Cross Listing
- Distance Education

**Description of Proposal:** SAFE 441/541: Accident Investigation

**Department:** Department of Safety Sciences

**Appendix B**

~~Graduate Director, Education Center, A. J. ...~~

**Course:** SAFE 441/541 Accident Investigation

3cr-0l-3sh

**Instructor of Record:** Dr. Lon Ferguson

Criteria used for Department review of course format as listed under the CBA Article 42, Section B, 2.

**1. Will a qualified instructor teach the course?**

Dr. Lon Ferguson will be an instructor of this class. Dr. Ferguson is a Professor with over 10

**4. Will there be suitable methods used to evaluate student achievement?**

Multiple assessment techniques will be used to evaluate student achievement. They will include at a minimum the following:

- Timed tests using WebCT with password protection

- Comprehensive collaborative projects
- Individual projects assigned to students and submitted via email

(Required for all courses taught by distance education for more than one-third of teaching contact hours)

**Existing and Special Topics Course**

DEPARTMENT: Safety Sciences PERSON: Lon Ferguson

**Step One: Department or its Curriculum Committee**

The committee has reviewed the proposal to offer the above course using distance education technology, and responds to the CRA criteria as follows:

**Step Three: Provost**

\_\_\_\_ Approved as distance education course

\_\_\_\_ Rejected as distance education course

\_\_\_\_\_ signature of Provost

\_\_\_\_\_ date

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**Step Four:**

**Forward materials to Dean of the School of Continuing Education, who will inform appropriate office**