Statement of Intent and Purpose Development of Materials for Online Delivery

Name of Faculty Member:			
Course Number and Title:			
Name of Degree/Academic	Program:		
Proposed Delivery Semest	er: Summer 20	D13 Fall 201	3 Spring 2014
Statement of Need			
delivery. Your statement of n regarding how this course fits	eed should be clear, concises into the degree/academic p	ed description of the need to e, and informative. It should corogram stated above. Include responses, accessibility, etc.).	ontain pertinent information any data to support your
Signatures of Assuran	ce		
Department Chair:	(print)	(signature)	(date)
Dean:	(print)	(signature)	(uate)
	(print)	(signature)	(date)
Provost:	(print)	(signature)	 (date)

Confidential

Statement of Intent and Purpose