

**LSUA Electronic Course Review Form**

**Course:** \_\_\_\_\_

**Professor/Instructor:** \_\_\_\_\_

**Date of Review:** \_\_\_\_\_

**DLC Reviewer:** \_\_\_\_\_ / \_\_\_\_\_  
Position

**DLC Reviewer:** \_\_\_\_\_ / \_\_\_\_\_  
Position

**DLC Reviewer:** \_\_\_\_\_ / \_\_\_\_\_  
Position

**Review Committee Action:**

- This course met the above criteria. This course is recommended for distance delivery. The course is scheduled for review again \_\_\_\_\_. (indicate semester/year)
- This course met most of the above criteria. Suggestions for improvement are detailed on the attached form. It is recommended that the course be approved for delivery pending these changes.
- This course **DID NOT** meet all of the above criteria. This course is not recommended for approval at this time. See attached explanation. This course is recommended for review prior to being offered.

**Department Chair Action:**

- Course is recommended for online delivery.
- Course is recommended for online delivery pending recommended changes.
- Course is not recommended for online delivery at this time.
  
- If course requires changes or is not recommended, reschedule review?  
\_\_\_\_\_.

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**Name** **Date**

**Dean Approval (if recommended for online delivery):**

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**Name** **Date**