

Fall 2020 Emergency Temporary Distance Education Blanket Addendum Request

Frequently Asked Questions (FAQ) about the Temporary Emergency Distance Education Blanket Addendum

This page opens up a PDF document in a separate tab of your browser and contains 72 questions in 10 categories related to the Temporary Emergency Distance Education Blanket Addendum. Click on the link below to view the FAQ.

When the document opens there is a Table of Contents containing the 10 categories and 72 questions. Simply click on a question in the Table of Contents and you will be directed to the page with the question and its answer.

To return to the submission form simply click on the tab in your browser where the form is located.

Temporary Emergency DE Addendum Frequently Asked Questions (5-2020)

Overview and responsible person information

The California Community Colleges Chancellor's Office (CCCCO) is working to minimize disruption and maximize student learning during the COVID-19 pandemic. This form serves to document college requests for a Temporary Emergency Distance Education Blanket Addendum for the Fall 2020 term. To complete the submission of the request, you will need to complete the attachments detailed in the updated guidance ES 20-21 memorandum. (Additional details are also provided again below).

Districts may submit these requests on behalf of the colleges. In such cases, under institutional role, make sure to note the district role and include the name of the district. Under these circumstances, however, a separate submission is still required for each college.

This form contains a Save and Continue button at the top of the page. To save information on a page go to the next page and click the button and follow the instructions.

1) Responsible Person Contact Information

Please provide the name and contact information of the Chief Instructional Officer or Chief Executive Officer of the college or district-level equivalent who is submitting this Emergency Temporary Distance Education Blanket Addendum Request on behalf of the college.*

irst Name*:
ast Name*:
Title*:
District Name*:
College Name*:
Email Address*:
Vork Phone Number If current work number is not operational, please simply provide a mobile or other number at which the responsible person can be reached.)*:
Mobile Phone Number if one would prefer not to provide a mobile number, please simply provide the work number gain)*:

Requested basic required information

The information on this page is the required basic information needed to review the request.

2) Reason for the Emergency Temporary Distance Education Blanket Addendum Request (Please choose only one - any write in response other than COVID-19 Pandemic requires

prior approval of the Executive Vice Chancellor)*	
[] COVID-19 Pandemic	
[] Other - Write In:	
3) Term covered by this Emergency Temporary Distance Ed Request (Please choose only one)*	ducation Blanket Addendum
[] Fall 2020	
[] Other - Write In:	
4) Anticipated Start Date (MM/DD/YYYY format. In the start date of the selected term)*	most cases, this should be
5) Anticipated End Date (MM/DD/YYY format. in me end date of the selected term)*	ost cases, this should be the
6) Total number of sections whose delivery method with COVID19 pandemic and are covered by this request*	· ·
7) Total number of sections whose delivery method w	ill not be affected*

Files upload page

This page is for uploading files related to courses and programs with over 50% distance education delivery. Please assure that all files have data or indicate "0" if data is not applicable.

8) Upload file containing 1) courses covered by the addendum and 2) courses that will remain face to face for the term of submission. Your file should be named using the following naming convention: District-college-identifier(GI01)_Collegename_term-identifier(GI03)_Term2020_CourseFile - thus a submission for College of Alameda for Fall 2020 would be named 341_Alameda_205_Fall2020_CourseFile.xlsx. A sample of the file format for the submitted courses can be found here: http://bit.ly/DECourseFile*

Note: Please use the file at the following link. http://bit.ly/DECourseFile. It has two columns in both the DE tab and the face-to-face tabs related to the number of course sections and the total number of students that may enroll in these course sections. Submissions not including these two columns will be returned as incomplete.

Summary and comparison of courses and students in the Summer 2020 and Fall 2020 terms.

Provide information below related to the number of courses in both terms for distance education and face to face and the number of students that will be potentially served.

	Summer 2020	Fall 2020
Courses covered by the addendum		
Courses that will remain face to face		
Number of students served		

9) Upload list of any programs, certificates, or degrees in which 50% or more of the courses are delivered via distance education or correspondence education. Your file should be named using the following naming convention: District-college-identifier(GI01)_Collegename_Fall_Term_2020_ProgramFile. A sample of the file format for the submitted programs can be found here: http://bit.ly/DEProgramFile*

Provide the total number of programs where 50% or more of the courses are delivered via distance education in the Summer 2020 and Fall 2020 terms.

	Summer 2020	Fall 2020
Programs, certificates, or degrees in which 50% or more of courses are via distance education or correspondence education		
Course Approval and Professiona This page collects information about the coll professional development plans.	•	G
10) Detail aspects of your course approval pl components. This is action for obtaining loc in this addendum by December 30, 2020.		
The plan should include, at minimum, 1) a summary of the local approval process, 2) the frequency or intended frequency of th complete the plan, and 3) a schedule for the number of courses that	e committee meetings	needed to
Please provide a short summary (500 words or les involved.	s) of the process and the	committees
	_	
	_	

The frequency of meetings::

Schedule of the number of courses to be approved on a monthly basis

Please put the dates in the appropriate month and the number of courses that will be approved on those dates.

(If you do not meet in the month put **Not Applicable** in the text box.)

	Meeting Dates
August 2020 Meeting Dates	
September 2020 Meeting Dates	
October 2020 Meeting Dates	
November 2020 Meeting Dates	
December 2020 Meeting Dates	

11) Detail aspects of your professional development approval plan by completing the following components. This is planned action for providing professional development in this addendum by December 31, 2020.

The plan should include, at minimum:

- 1) anticipated training schedules,
- 2) training topics to be covered,
- 3) anticipated number of new classroom faculty trained,
- 4) anticipated number of new counselors trained,
- 5) anticipated number of new librarians trained,
- 6) anticipated number of new classified staff trained, and
- 7) Summary of the process and committees involved.

Training schedule and topics on a monthly basis

If you do not meet in the month put **Not Applicable** in the text box.

	Training Dates	Training Topics	
August 2020 Training Dates			
September 2020 Training Dates			
October 2020 Training Dates			
November 2020 Training Dates			
December 2020 Training Dates			
Anticipated number of new classroom faculty trained in the Summer 2020 term.: Anticipated number of new classroom faculty trained in the Fall 2020 term.:			
Anticipated number of new counselors trained in the Summer 2020 term.: Anticipated number of new counselors faculty trained in the Fall 2020 term.:			
Anticipated number of new librarians trained in the Summer 2020 term.:			
Anticipated number of new librarians trained in the Fall 2020 term.:			
Anticipated number of new classified staff trained in the Summer 2020 term.:			
Anticipated number of new classified staff trained in the Fall 2020 term.:			
Summary of the process and the committees involved.			

Additional Information about Professional Development

This page is for submitting additional information about the top rated areas of professional development.

This is also the last page of the form. Once you go beyond this page your form will be submitted and a communication will be sent to you indicating your submission is complete.

12) Please provide the top three professional development topics your Faculty Counselors, and Classified Staff feel are the most valuable.			
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