



**CHABOT-LAS POSITAS COMMUNITY COLLEGE DISTRICT**  
**Online Education Initiative (OEI)**  
**Course Alignment Application (for Payment)**



This form is to be submitted by Faculty who are aligning an eligible course with the Online Education Initiative (OEI) Course Design Rubric and wish to receive compensation as specified in the Memorandum Of Understanding (MOU) between the Faculty Association and District dated [April 19, 2019](#). Fill out, print, and submit this form to your Division Dean.

**TO APPLY, PLEASE COMPLETE THE INFORMATION BELOW:**

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone number: \_\_\_\_\_ Discipline: \_\_\_\_\_

Course to be taught at (check one):  Chabot  Las Positas I am (check one) :  Full-time  Part-Time

**PROPOSAL TYPE**

**What course do you propose to align?**

Discipline Descriptor (Rubric) and Number: \_\_\_\_\_

Course Name: \_\_\_\_\_ # of Units: \_\_\_\_\_

Check one:

- This will be my first OEI aligned course (13 F-hours compensation).
- This is my second or subsequent OEI aligned course (7 F-hours compensation).

**Course Eligibility – standards determined by the OEI**

I have taught this course online at least one (1) semester in this District in Canvas.  Yes  No

This course meets the following criteria for CVC-OEI eligibility (check all that apply):

- ADT  IGETC  CSU GE  CTE

C-ID for this class, if applicable: \_\_\_\_\_

**SIGNATURES:**

By signing below, I acknowledge that:

- I will only receive payment for the OEI aligned course when the course is aligned to the CVC-OEI Course Design Rubric as determined by the CVC-OEI. When the alignment is verified, the Faculty member is responsible for submitting their non-instructional timesheet to the appropriate Division Dean’s Office, who will then generate an ePAF to authorize timesheet payment.

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**DEAN'S ENDORSEMENT:**

This application is approved to align the above course and section for the \_\_\_\_\_ discipline. OEI aligned courses can be assigned according to the appropriate Division Dean's discretion over and above the allotment described in Article 18B.1g.

I have consulted with the appropriate discipline coordinator and the Vice President of Academic Services.

The course is tentatively scheduled for  Summer  Fall  Spring Year \_\_\_\_\_

Printed Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Distribution of signed form:

- \_\_\_\_ Original to be attached to the Personal Action Form (PAF) that is to be submitted to Human Resources
- \_\_\_\_ copy to Faculty
- \_\_\_\_ copy to Dean
- \_\_\_\_ copy to Canvas Administrator
- \_\_\_\_ copy to College Project Leader
- \_\_\_\_ copy to Faculty OEI Lead, as applicable

*Reference:* Article(s) To be provided – Faculty Collective Bargaining Agreement