

Distance Learning Form

Name of the Student: _____

Degree: _____ Major: _____

Confer Date: _____

1. Did the Student earn their degree entirely through traditional, face-to-face coursework*? Yes No

2. Was coursework completed only on the main campus**? Yes No

*If not, did the student complete any coursework through distance/online, hybrid, web-based, web-enhanced, or web-enabled classes? If so, please list the courses in the chart below.

Course Title	# of Credit Hours	*Course Type	% of Course Completed Online			
			(25%	50%	75%	100%)

_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**If the student did not study on the main campus, please clarify: _____

University Point-Of-Contact Information

Name: _____

Phone Number: _____

Email: _____