Webinar Course Checklist

Course Name:

Provider Number:

- Please check to confirm and acknowledge the following:

	Please check for acknowledgment
All webinar courses will be submitted and approved as classroom courses. (Previously approved classroom courses must be resubmitted to the Department for approval as a webinar.)	
The title of the course must include the word "Webinar", "Webcast"	
The course will be taught by an approved Florida instructor.	
The class will be conducted in real time in all locations.	
The students in all locations will be able to interact in real time with the instructor. Describe your procedure:	
The provider will verify the identity and license number of all participants. Describe your procedure:	
The provider will send the Department an invitation to each of their webinars at the following email address: DFSWebinars@MyFloridaCFO.com *This invitation will be used for course auditing purposes.*	
All materials required for the web course will be provided to all participants at all locations. (Submit electronic copies of all course materials and student handouts.)	
The provider will maintain records of all acknowledgments from attendees verifying their identity and their participation in the course. Electronic acknowledgments are acceptable. At minimum, the acknowledgment forms should include the information provided in the sample below	

I _____(name)_____ certify that I participated in and attended all sessions of the following webinar course_____(Florida Course ID)_____ on ____(date course taken)____.

_____(Signature)_____ _____(Print Name)_____ _____(Date)_____

Revised 4/9/2018