Virtual Course Checklist

Course Name:

Provider Number:

- Please check to confirm and acknowledge the following:

	Please check for acknowledgment.
All virtual courses will be submitted and approved as classroom courses. (Previously approved classroom/webinar courses must be resubmitted to the Department for approval as a virtual course.)	
The title of the course must include the word "Virtual".	
The course will be taught by an approved Florida Instructor.	
The students must have access to the Instructor upon request.	
The students in all locations will be able to interact with the instructor. Describe your procedure:	
The provider will verify students' government issued photo ID and license number of all participants. Describe your procedure:	
The provider will verify students' participation throughout the duration of the course. Describe your procedure:	
The provider will give the Department dedicated course access to review the course at any given time. *This requirement is used for course auditing purposes.*	
All materials for the virtual 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 completed all sessions of the following virtual course: _____(Florida Course ID)__ on____(date course taken)_____.

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