



## Blackboard – Course Copy/Split Request Form

Please return this form to Maureen Williams on the Patchogue Campus.  
Phone: 631-447-3883 Email: mwilliams@sjcny.edu

**For supplement courses, this form is due 3 weeks prior to the start of classes.**

**Date:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
**Instructors Name:** \_\_\_\_\_ **SJC Email:** \_\_\_\_\_

You may request up to 3 supplement copies and 1 full online split course shell with this form. For additional requests, please use an additional form.

The **Course Id to Copy** is the id from Blackboard. The **New Course #** *must* include division (list below), course number and all sections to be combined (see example below). If a separate course shell is desired for each section, please complete one supplement course copy area for each course. If the course is **Cross-listed**, please provide cross-listed course number and section. If you would like the course discussion board copied, please select the check box next to **DB Copy**.

Course Copy Example		Supplement Course Copy 1	
Course Id to Copy	20.BUS120.1.2.FA06	Course Id to Copy	_____
New Course #	BUS-120-SAS03 and 04	New Course #	_____
Cross-listed with	ECO-120-SAS03	Cross-listed with	_____
Semester/Year	Spring 2007	Semester/Year	_____
Course Start Date	January 22	Course Start Date	_____
	DB Copy <input checked="" type="checkbox"/>		DB Copy <input type="checkbox"/>

Supplement Course Copy 2		Supplement Course Copy 3	
Course Id to Copy	_____	Course Id to Copy	_____
New Course #	_____	New Course #	_____
Cross-listed with	_____	Cross-listed with	_____
Semester/Year	_____	Semester/Year	_____
Course Start Date	_____	Course Start Date	_____
	DB Copy <input type="checkbox"/>		DB Copy <input type="checkbox"/>

Full Online/Hybrid Course <u>Split</u> Only:	
<b>Copy of existing full online/hybrid course for a new instructor to teach.</b>	
Full <u>online</u> course splits must have departmental approval. If the instructor is new to Blackboard, they must attend/have attended Blackboard Training. Please visit: <a href="http://tis.sjcny.edu/training">http://tis.sjcny.edu/training</a> for the schedule of trainings. Please have your department chairperson sign below and designate a person to contact when the course is ready for department review.	
Course Id to Copy _____	Instructor of copied course _____
New Course # _____	Semester/Year _____
Chair Signature _____	Contact Person for Department Review _____

**Comments:**

Division code list:  
 SAS – Long Island A&S                      SAP – Long Island PGS                      SWK– Long Island PGS Weekend  
 BAS – Brooklyn Arts and Sciences        BAP – Brooklyn PGS