

Course Management System (CMS) Guest Access Form

- Guest Access:** Guest access is given at the request of faculty members who wish to share their courses with non-LCC affiliated persons for professional development purposes. This access is view only and time limited.
- Accreditation Agencies:** Courses that need to add non-LCC users to their course for accreditation purposes. This access is view only and time limited.

By completing this form you acknowledge through your signature below:

1. I understand that I am not an employee of LCC and that I am not covered by LCC's insurance (Workers' Compensation, general liability, automobile, Errors and Omissions).
2. I understand that I may obtain access to or knowledge of information of a confidential or sensitive nature. I agree not to directly or indirectly disclose or use any such information for any purpose without the prior written consent of LCC, and realize that I am bound by FERPA regulation.

Printed Name: _____

Signature: _____ Date: _____

Course Code: _____ CRN: _____ Semester (i.e., Fall 2018): _____

Dates of Access (MM/DD/YY): _____

Reason for Request (Please attach additional documentation if necessary):

Name of Home Institution: _____

Printed Name: _____

Signature: _____ Date: _____

LCC Faculty Member: _____ Signature: _____

Date: _____

Associate Dean Signature:

Date: _____

After securing all signatures, please forward all documentation to the eLearning Department at:
eLearning@lcc.edu