

Request to Add Personnel to a Course in the Learning Management System

Please email this form, signed by your Department, Unit, or Program Head to lms@hunter.cuny.edu

In order to access BrightSpace course sites, Instructors, Co-Instructors, and Teaching Assistants must be listed officially on CUNYfirst, CUNY GLOBAL SEARCH.

INSTRUCTOR OF RECORD

1. Name _____ Date _____
2. Email Address _____
3. Department/Unit/Program _____
4. Semester (i.e. Fall 2024) _____ Course Number (i.e. CHEM 10200) _____
5. Unique 4- or 5-digit Class Number/Course Code _____ Section Number _____

PURPOSE OF ADDITION (Assigned Role)

1. **Observer** (Read only access. Users with this role will only be able to view course information. No email capabilities. Observation periods are within 48 hrs.) Start: _____ End: _____
2. **Teaching Assistant** (Secondary instructional role, has access to grades.)
3. **Reviewer** (This role has the ability to view course content and export it to another course.)
4. **Instructor** (Main instructional role, has access to conduct all course design, communication, and grading activities.)
5. **Designer** (For design purposes, main purpose is to build out course content. Cannot access learner and grades.)
6. **Librarian** (Access to most course management tools as well as some assessment tools.)
7. **Grader** (Role does not have course creation abilities. This role is only used to grade student work.)
8. **Student** (Only for students working on completing an INC or other special circumstances. Access to LMS does not mean the student will obtain official credit for attending the course.)

ADDITION REQUEST DETAILS

Role(s), Name(s), and EMPL ID(s) of the personnel to be added:

Role	Name	EMPLID

ADMINISTRATIVE (CHAIR/DEAN/PROGRAM DIRECTOR as appropriate) APPROVAL

As Department/Unit/Program Head, I approve the request to add the above instructor/TAs to this Learning Management System (Brightspace) course and attest that the instructors and/or TAs are listed as official Instructors/TAs on CUNYfirst. Department/Unit/Program Head

Signature _____ Date _____
(Chair/Dean/Program Director as appropriate)

*** IMPORTANT NOTE: Peer Observers will be removed, within 48 hours of the observation end date as per PSC policy, <https://psc-cuny.org/memorandum-agreement-2019/>**