

# LSSC Course Provider Application

## PART 1: COURSE INFORMATION

Course Title: \_\_\_\_\_

### Competency Set Covered (check one):

#### REQUIRED

- Foundations of Library Services
- Communication and Teamwork
- Technology

#### ELECTIVE

- |   |   |
|---|---|
| <input type="checkbox"/> Access Services                  | <input type="checkbox"/> Reference and Information Services |
| <input type="checkbox"/> Adult Readers' Advisory Services | <input type="checkbox"/> Supervision and Management         |
| <input type="checkbox"/> Cataloging and Classification    | <input type="checkbox"/> Youth Services                     |
| <input type="checkbox"/> Collection Management            |   |

Course Sponsor: \_\_\_\_\_  
Headquarters Location: \_\_\_\_\_

Name of Contact: \_\_\_\_\_  
Institution: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Web site: \_\_\_\_\_

### Course Format:

- Online (synchronous - specified, regular time)
- Online (asynchronous - self-paced)
- Face-to-face (in person)
- A combination of online and face-to-face

### Course Description:

**Course Schedule:**

How often will the course be offered? \_\_\_\_\_  
Start date for next course: \_\_\_\_\_

**Course Costs:**

Registration: \_\_\_\_\_  
Materials: \_\_\_\_\_  
Other: \_\_\_\_\_  
Total: \_\_\_\_\_

**Part II. REQUIRED INFORMATION AND ATTACHMENTS**

The following items must be attached to the application form in the order shown below. Applicant must clearly label each attachment. Before submitting the application, applicant should review the [Course Approval Evaluation Rubric](#) to review the criteria used to evaluate each course. Applications must meet the criteria outlined in the rubric.

1. The course syllabus that the instructor will use and the candidate will receive.
2. A map of the LSSC competency set showing how the course's content, learning objectives, and assignments are aligned with the competencies (forms available at <http://ala-apa.org/lssc/for-course-providers/>).
3. The following information, if not already **clearly** provided in the syllabus:
  - a. Teaching methods, including readings if applicable
  - b. Assessment methods (description or example)
  - c. Communication methods between instructor and student and between students
4. Resumes/Curriculum Vitae of course instructor(s).
5. Minimum technology requirements, **IF** the course is offered online.

Please send a copy of this form and requested documents electronically to [lssc@ala.org](mailto:lssc@ala.org).  
**Please check each statement to indicate agreement (required):**

- \_\_\_\_ The proposed course covers all competencies in the competency set.  
\_\_\_\_ The applicant agrees to keep student records for five years.

I certify that the information provided above is accurate and that I am authorized to sign this application on behalf of the provider.

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Date: \_\_\_\_\_

For office use only:

Date Approved: \_\_\_\_\_  
Approval Expires: \_\_\_\_\_

**Part III. Course application fee**

First and second courses: \$100 each course

Each additional course: \$50 each course

Please make all checks out to the ALA-Allied Professional Association or ALA-APA. Credit card payments may be made via fax using the attached form. Invoices will not be accepted.

**APPLICATION FEE CREDIT CARD AUTHORIZATION FORM**

I am/My institution is applying to become a provider/renew approval for the LSSC Program.

I authorize the following payment:

\_\_\_\_\_ Number of courses applications submitted

x

\_\_\_\_\_ First and second course applications submitted: \$100 each course; subsequent submissions: \$50 each.

\_\_\_\_\_ Total

A course covering two or more competency sets will require submission of separate applications and fees for each set. **All fees are non-refundable.**

Visa   Mastercard   American Express

Cardholder's Name \_\_\_\_\_

Institution \_\_\_\_\_

Account Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

Fax to LSSC at 312-280-5297.