# Distance Education Captioning & Transcription

## ONLINE APPLICATION GUIDE

EXPANDING ACCESS

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### **Contact:**

Justin Manalang DECT Program Coordinator Tele: (661) 362-3177 Fax: (661) 362-3697 captioning@canyons.edu



College of the CANYONS Distance Education Captioning & Transcription

#### After clicking the "DECT online application" button, the following screen will pop up.

Docu Sign		BEGIN SIGNING	() HELP
	PowerForm Signer Information		
	Fill in the name and email for each signing role listed below. Signers will receive an email inviting them to sign this document.		
	Please enter your name and email to begin the signing process.		
	Primary Contact		
	Your Name: *		
	Full Name		
	Your Email: *		
	Email Address		
	Please provide information for any other signers needed for this document.		
	Secondary Contact		
	Name:		
	Full Name		
	Email:		
	Email Address		
	Applicant College Board Authorized Approver		
	Name:		
	Full Name		
	Email:		
	Email Address		
	BEGIN SIGNING		

Please type in the names and emails of the Primary Contact, Secondary Contact, and Applicant College Board-Authorized Approver. The information will be automatically added to the application in the appropriate fields. Once you finish inputting the names and emails, click the "Begin Signing" button.

After clicking the "Begin Signing" button, the following screen will pop up

Please enter the access code to view the document
Primary Contact Applicant College Community College
An email has just been sent to your email address with a special validation code in it. To proceed to sign your documents please open your email, and enter the code into the box below. Keep this browser window open while you get your email.
Access Code  I NEVER RECEIVED AN ACCESS CODE
Show Text

You will receive an email from Docusign with your "Signing validation code". If you need to finish your application at a later time, you will return to this email to access your application in progress. Copy the Access code into the previous screen to view the application.

Docu	Sign NA3 System <dse_na3@docusign.net></dse_na3@docusign.net>	
	alidation: Please DocuSign: DECT Application Form	
To Captioning	th how this message is displayed, click here to view it in a web browser.	
<b>U</b> and the protocol of the	a nan ala manafe a adhahad ana ma a man a na manan	^
	Docu Sign. Signing validation code: ********	
	Copy and enter the validation code into the access page to continue signing. If you did not start signing Please DocuSign: DECT Application Form, please contact support.	
	Do Not Share This Email This email contains a secure link to DocuSign. Please do not share this email, link, or access code with others	Ŧ

Once you enter your access code, the following screen will pop up:

Please Review & Act on These Documents	Docu Sign
Primary Contact Applicant Distict Community College	
,,,,	
Please read the <u>Electronic Record and Signature Disclosure</u> .  CONTINUE CONTINUE	
DocuSign Envelope ID: D9ADAA44-47F7-4471-A7F2-56DA9F590F85	
SANTA CLARITA COMMUNITY COLLEGE DISTRICT Application and Agreement Form Distance Education Captioning and Transcription Grant Funding	
Distance Education Captioning and Transcription Grant Funding     This Box to BE COMPLE     PROJECT # BY SANTA CLARITA CC	
1. APPLICANT DISTRICT INFORMATION District Name	
College Name Street Address	
Cny, State, Zp PRIMARY CONTACT	
Contact Primary Contact	
Title Email Address PrimaryContact@college.edu	
Telephone # Fax # SECONDARY CONTACT	
Contact Name Title	-
Email Address	

**IMPORTANT:** Clicking the "Begin Signing" button will start a new application. If you need to complete the application at a later time, **do not exit out of the web browser**! If you need to exit at any point during the process, please click "Other Actions" then"Finish Later" at the top of the screen. This will save your application in its current state, as well as send you an email with a link to resume your application.

Please read the <u>Electronic Record and Signature Disclosure</u> .      I agree to use electronic records and signatures.	CONTINUE OTHER ACTIONS -
	Finish Later
	Print & Sign
SANTA CLARITA COMMUNITY COLLEGE DISTRICT Application and Agreement Form	Decline to sign
Distance Education Captioning and Transcription Grant F	unt

Begin by clicking the box marked "I agree to use electronic records and signature"



You are now ready to fill out the form. When filling out the application, the Primary Contact Name and Primary Contact Email will be automatically filled in. Any Required Fields will be outlined in RED, and any Optional Fields will be outlined in GRAY. Please fill out all pertinent information.

#### Attaching your DECT funding quote:



In order to attach your DECT funding quote from you Captioning Vendor, please click on the button on the bottom right corner of Page 1. A pop-up will appear, in which you can attach your DECT funding quote. Once you click done, the attachment will now be visible as the last page of your application. If you need to change your attachment or add additional pages, you can click the now Gray attachment button to bring up the previous pop-up, and make the appropriate changes.



Also, in order to attach the information for the content to be captioned, click the "Content for Captioning Information" attachment button. This is the same information that you

provide to the Captioning Vendor when obtaining a quote for captioning. For Realtime/Synchronous Captioning, you can provide the schedule of classes of the students, and for Delayed/Asynchronous Captioning, you will include a list of the videos/content for captioning. If you are requesting captioning for instructor produced content, please attach a copy of the email to the vendor which indicates that it is for instructor produced content.

#### **Course Information:**

For each course that you are submitting for captioning, you will need to fill out the following

- Course Title
- Semester & Year
- Section Number
- Apportionment Eligible
- Anticipated Enrollment
- Delivery Mode
- Type of Media
- Minutes/Hours
- Total Time to be Captioned

		PROJECT COUF	SES	
		PROJECT		BOX TO BE COMPLETED SANTA CLARITA CCD
	RMATION FOR CLASS(ES) for whic any and all required written releases a			listrict is solely responsible for
Course Title			Term: Semester & Year	
Section Number			NMENT ELIGIBLE? "NO", Project is NOT eligible	Anticipated Enrollment
Delivery Mode	Online Hybrid Other (specify):	Via LMS Telev	ourse Interactive Vic	leo In Class (Realtime)
Type of Media	Audio Video Other (specify):	PowerPoint Slides	Animation	Realtime Captioning / CART
	1		Total select to be captioned	
Course Title			Term: Semester & Year	
Section Number			NMENT ELIGIBLE? "NO", Project is NOT eligible	Anticipated Enrollment
Delivery Mode	Online Hybrid Other (specify):	UVia LMS Telev	ourse Interactive Vic	leo In Class (Realtime)
Type of Media	Audio Video Other (specify):	PowerPoint Slides	□ Animation [	Realtime Captioning / CART
			Total	

Only one course is visible when starting the application. If you have more than ONE course, begin typing the Course Title for the additional courses. Once you type in the title, additional fields will pop-up for you to complete. The application has space for fifteen (15) courses. If you need additional space, please fill out the "Additional Project Courses" form (available on the Forms page of the website) and please click the attachment button located at the Top Left corner of Page 6 of the application.

	PROJECT COURSES
Please clica baro to baro courses Optional	PROJECT #         THIS BOX TO BE COMPLETED BY SANTA CLARITA CCD           If more than fifteen (15) courses, provide the following information on the "Additional Project Courses" sheet, available on the website, and attach in the box to the left
Title	Term: Semester & Year

Once you finish imputing all the information and attachment(s), click "Finish" to submit your application. It will be sent in for review by the DECT office.

## Once the Primary Contact has finished the DECT application and has been reviewed by the DECT Office, an email will be sent to the Secondary Contact to notify him/her that the DECT application is ready for signature.

When filling out the application, the Secondary Contact Name and Secondary Contact Email will be automatically filled in. Any Required Fields will be outlined in RED, and any Optional Fields will be outlined in GRAY.

The Secondary Contact will need to fill in the following fields:

- Secondary Contact Title
- Secondary Contact Phone Number
- Secondary Contact Fax Number

Also, on Page 2 of the DECT application, the Secondary Contact will also need to sign under the "Applicant District Acknowledgements and Responsibilities."

Once all of the above has been put in, click "Finish." This completes all the actions required for the Secondary Contact, and will forward the application to the "Applicant District Board-Authorized Approver" for signatures.

## **DECT Online Application** Applicant District Board-Authorized Approver

## Once the Secondary Contact has finished the signing the DECT application, an email will be sent to the Applicant District Board-Authorized Approver to notify him/her that the DECT application is ready for signature.

When filling out the application, the Applicant District Board-Authorized Approver Name and Applicant District Board-Authorized Approver Email will be automatically filled in. Any Required Fields will be outlined in RED, and any Optional Fields will be outlined in GRAY.

The Applicant District Board-Authorized Approver will need to fill in the following fields:

• Applicant District Board-Authorized Approver Title

On Page 2 of the DECT application, the Secondary Contact will also need to sign under the "Applicant District Acknowledgements and Responsibilities."

Once all of the above has been put in, click "Finish." This completes all the actions required for the Applicant District Board-Authorized Approver, and will complete the initial application for the Applicant District. The application will be forwarded to the DECT Office for signatures and to finish the approval process. Once the application has been approved, the "Primary Contact" will received a copy of the approved application and the Applicant District can begin captioning services.

Once the Secondary Contact and Applicant District Board-Authorized Approver have both signed the application, an informative email will be sent to the Primary Contact to inform him/her that both parties have signed the application and is pending approval from the DECT office.

The email will provide a link to view the document in its current state. Please click the link to view the document with its current signatures. No other actions are required and you do not need to save the application in its current state. A copy of the approved application will be automatically sent to you to save for your records

**IMPORTANT:** Please click the link provided in the email to view the document, or else your application will not progress forward for approval, and will remain pending. Once the link has been clicked, the application will be forwarded to the DECT office for signatures and approval.

#### **DECT Online Application** Approved Application

Once the application has been signed by all parties from the Applicant College and SCCCD, an email will be sent to both the Primary Contact and Secondary Contact to inform you that the application has been approved.

Also, a copy of the signed and approved application will be attached so that you can save a copy for your records. Once you receive the approval email, you may begin captioning!

#### **APPROVAL PROCESS IS COMPLETE**

## When initially completing the application, you will fill out the following fields on the Request for Reimbursement/Payment form:

- District Name \*
- College Name \*
- College Address \*
- College City, State, Zip \*
- Payment Method

\* These fields should be filled in automatically and should match the information from the first page

The only field that you should need to fill in, is selecting the correct "Payment Method"

The Primary Contact, Secondary Contact, and Applicant Board-Authorized Approver will sign the Request for Reimbursement/Payment form at the END of the project.

#### Payment Method: A

For Payment Method: A, when you would like to request reimbursement for services under the approved project, please email the following to <u>captioning@canyons.edu</u> so that we can prepare the reimbursement form to the Applicant College for signature:

- A copy of the vendor's invoice with Applicant District's approval initials by each charge satisfactorily completed
- A copy of the Purchase Order and/or contract issued, when applicable to the Vendor
- A copy of the Applicant District's payment check to the Vendor

Once all these have been received, the prepared Request for Reimbursement/Payment form will be sent to the Primary Contact, Secondary Contact, and Applicant Board-Authorized Approver for signature.

If you need to submit multiple requests for reimbursement, please follow the above steps for each additional request.

#### Payment Method: B

For Payment Method: B, the Request for Reimbursement/Payment form will be sent at the END of the project once all the work for the approve Project has been completed.

The prepared form with the total amount paid to the vendor will be sent to the Primary Contact, Secondary Contact, and Applicant College Board-Authorized Approver for signature.