

## **Faculty Request for Captioning**

Instructions: Please check to determine if all your video materials are captioned or subtitled before assigning them or showing them with the class. If not, you can refer to the several captioning resources available online for faculty to see if there is a captioned version of the video:

- Ted.com
- Films on Demand
- NBC Learn,
- YouTube, cc. (The automatic online captioning feature for YouTube has many inaccuracies, so please take care when selecting YouTube videos.)

If a captioned version cannot be found, submit this captioning request form to Ashley Robbins at anrobbins1@waketech.edu. Make your requests as early as possible, so that DSS can get your captioned videos to you by your planned viewing date. We ask for at least two weeks turnaround time.

### Third-Party Media

- Submit the link or video file to DSS.
- DSS must obtain copyright permission for every title.
- If you want only a portion of the video captioned, indicate as follows: segment (min:sec) 30:05 40:13, only.

### YouTube Videos with Captions

Often, YouTube automatic captions may not be correct. Please review the video before submitting it to DSS. If the captioning is incorrect, we can review and correct the captions of these videos. Please provide the transcript, if available.

# Note: if you own a copy with no captions, but the original has captions, the producer will NOT permit us to copy. This means your department will have to purchase the original.

### Instructor-Produced Videos

Submit the link or video file and transcript, if available. No permission will need to be obtained.

Once the captioned video is complete, a YouTube URL will be emailed to you. The captioned video is for accommodation purposes, and the link only will be available for the student and instructor during this academic semester. At the end of the semester, the video will be taken down in coherence of various mandates.

### Please complete the following information.

Part 1		
Instructor's Name:		Telephone:
Email:	Course/Section:	
Semester:	Campus:	



Media Information				
Video Title:				
Video Type:  Online (Please provide the URL):				
□ Instructor-created				
Planned Viewing Date:				
Length to Caption:				
Section (please indicate the section time):				
Year: Producer:				
Comments/Directions:				
Part 2				
Instructor's Name: Telephone:				
Email:   Course/Section:				
Semester: Campus:				
Media Information				
Video Title:				
Video Type:  Online (Please provide the URL):				
□ Instructor-created				
Planned Viewing Date:				
Length to Caption:				
$\Box$ Section (please indicate the section time):				
Year: Producer:				
Comments/Directions:				

South	Scott North	Perry Health	RTP
9101 Fayetteville Rd	6600 Louisburg Rd	2901 Holston Lane	10908 Chapel Hill Rd
Raleigh, NC 27603	Raleigh, NC 27616	Raleigh, NC 27610	Morrisville, NC 27560
919.662.3616 fax	919.866.7916 fax	919.662.3616 fax	919.866.7916 fax