

Program Review: 2017-18

Program: _____

Self Study

Annual Update

Prepared and submitted by:

Part I: Program Overview

A. Program Data Overview:

B. Student Learning Outcomes Assessment Overview:

A large, empty rectangular box with a thin black border, occupying the majority of the page below the section header. It is intended for the user to provide an overview of student learning outcomes assessment.

C. Curriculum Overview:

A large, empty rectangular box with a thin black border, occupying most of the page below the section header. It is intended for the user to provide a curriculum overview.

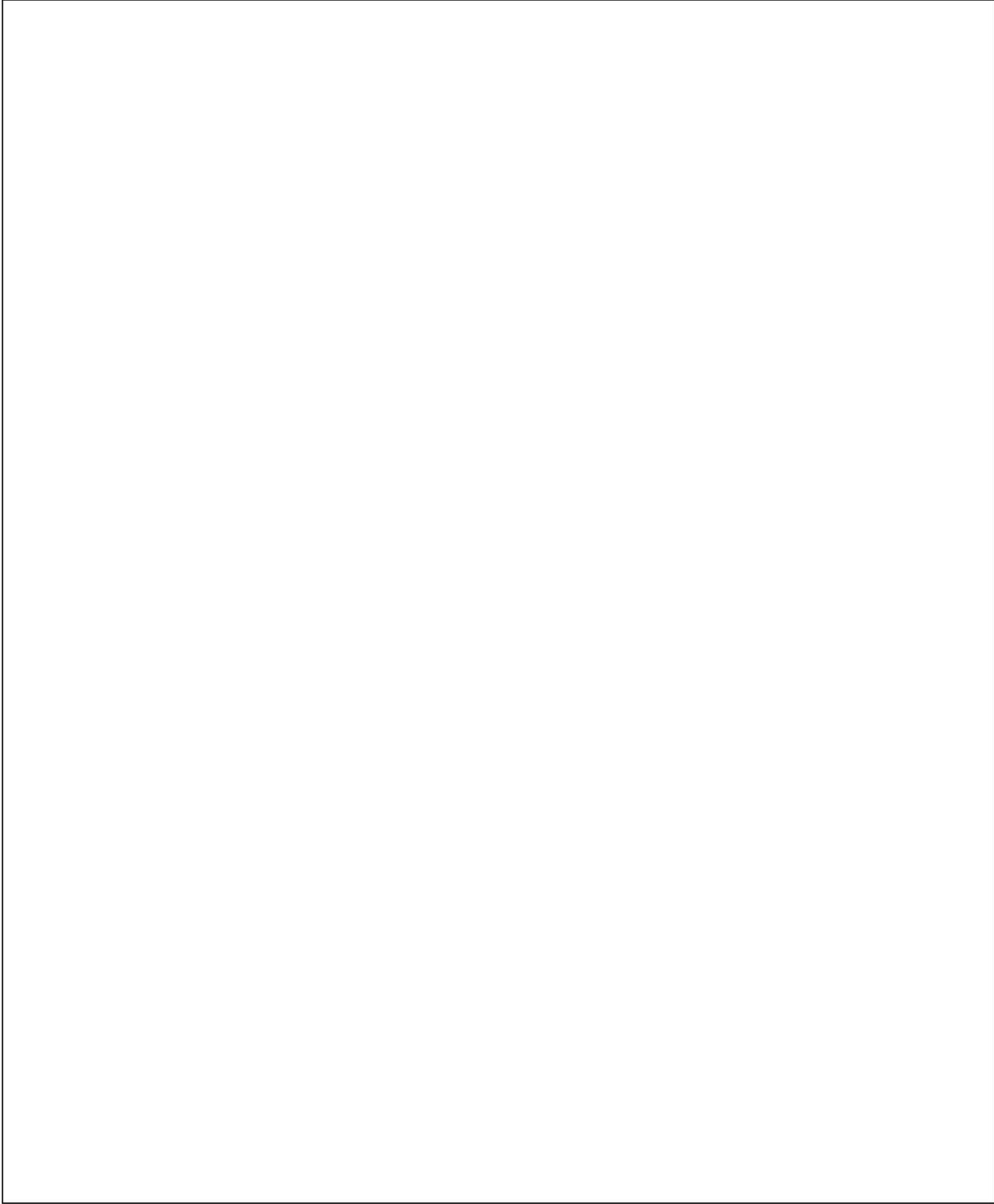
D. Scheduling Overview:

A large, empty rectangular box with a thin black border, occupying most of the page below the section header. It is intended for a scheduling overview but currently contains no text or diagrams.

E. Technology, Equipment, and Facilities:

A large, empty rectangular box with a thin black border, occupying most of the page below the section header. It is intended for text or other content related to the section header.

F. Academic Support Services and Library Resources:



G. Staffing and Professional Development:

A large, empty rectangular box with a thin black border, occupying most of the page below the section header. It is intended for the user to provide details regarding staffing and professional development.

H. Industry Trends/Advisory Committee Recommendations (Required for CTE):

A large, empty rectangular box with a thin black border, occupying most of the page below the section header. It is intended for the user to provide industry trends and advisory committee recommendations.

What additional data would help with your next program review?

Part II: Program Goals and Recommendations

List any short-term or long-term goals for the program:

Recommendation #1:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #2:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #3:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #4:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #5:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #6:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #7:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #8:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #9:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____

Recommendation #10:

Rationale/Supporting Evidence:

Check all areas that apply:

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Facilities | <input type="checkbox"/> Scheduling |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Library Resources | <input type="checkbox"/> Staffing |
| <input type="checkbox"/> Distance Education | <input type="checkbox"/> Professional Dev. | <input type="checkbox"/> Technology |
| <input type="checkbox"/> Equipment | <input type="checkbox"/> Safety | <input type="checkbox"/> Other: _____ |

Action plan:

Responsible party/parties:

Timeline:

Has associated cost: \$ _____

Priority: _____