

## Program Review

Date:

Name of Program:

Prepared by:

(List of faculty who participated in completing this program review)

***List the Program Learning Outcomes (PLOs) for this program.***

Enter your response here.

***Are students meeting the Program Learning Outcomes (PLOs) to your satisfaction (using a threshold of criteria for success)? Why or why not? To answer this question use the assessment data provided to you from the Office of Research and Planning. You may also use additional data to answer this question. Attach any data you use to this report.***

Enter your response here.

***After reviewing the assessment data, what changes will you make to help students meet the PLOs stated above?***

Enter your response here.

***What resources are needed to support students in meeting the PLOs? How will these resources support a student's ability to meet the PLO?***

Enter your response here.

***What additional data could support you in the future?***

Enter your response here.

Use the boxes below to report on previous goal implementation.

**Review the plan outlined in previous Program Reviews and discuss whether the Initiatives implemented impacted student learning.**

Initiative (from prior year)	Responsible Parties	Implementation Timeline	Status of Implementation

**Career Technical and Vocational programs must respond to the following questions. Based upon a review of the data provided:**

***Does this program/certificate meet a documented labor market demand?***

***Does the program represent unnecessary duplication of similar training programs?***

***And how does it demonstrate effectiveness, as measured by the employment and completion success of its students?***

**Thank you for your work in preparing this form. It will help us tremendously.**

**Reports are due to \_\_\_\_\_ by \_\_\_\_\_.**