

INSTRUCTION COMPREHENSIVE PROGRAM REVIEW TEMPLATE

Comprehensive Program Review

2018-2019

Due: February 11, 2019

1. Provide a *one-page executive summary* of the following components of your program review (complete this section after you have completed all of the other sections):
 - a. Program Overview and Description
 - b. Strengths
 - c. Challenges
 - d. External Influences
 - e. *How assessment results have guided your program*
 - f. Future Plans/Goals
2. Provide a list of the recommendations from your [last program review](#) *{link provided in the left-hand navigation box}* and explain how you have addressed them.
3. Provide a list of tenured/tenure track faculty and support staff in the program as of fall 2016.
4. Provide your program's mission statement.
5. Describe how your program supports the [mission and goals](#) of the College.
6. Provide the description of your program as it appears in the current college catalog.
7. Provide a list of degrees and certificates offered by the program during the past five years (PR Data warehouse), and industry-standard certificates or licensures supported by the program (CTE only for the latter).

For **each** degree and certificate, indicate:

 - a. how many awards were conferred
 - b. when it was last reviewed and updated
 - c. how it is meeting the needs of students, industry/workforce (if CTE), and/or articulation with four year institutions (transfer and CTE)
 - d. any changes that are planned if it is not meeting these needs
 - e. whether students can complete the degree/certificate requirements within a two-year period (*sequencing and scheduling of required courses are such that a student could complete them within a two year period or other appropriate timeline per requirements of specialized CTE certificates*); this is a requirement of Title 5, California Code of Regulations
8. Provide an overview of your program's Curriculum Review and Development status.
 - a. **Access the Five Year Curriculum Review Cycle. Have all of your active course outlines been reviewed within the last five years?** Yes No ~~indicate when courses were reviewed or are scheduled to be reviewed.~~
 - b. Write a paragraph about any changes planned for the curriculum, both areas of revision and areas of development and growth.
9. Provide an overview of your program's Program-Level SLO Assessment Plan.
 - a. Does your Dean have an updated copy of your PLO assessments? yes no
 - b. Provide an overview of significant findings and actions you have taken or plan to take to improve student outcomes.
 - c. Disaggregate and compare student learning outcomes assessment results by instructional modality (face-to-face vs. online).
10. Provide an overview of your Course-Level Assessment Plan. You can use the same support materials for this question as you did for the Program-Level assessment question.
 - a. Does your Dean have an updated copy of your SLO assessments? yes no

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*Comprehensive Program Review
2019-2020*

- b. Provide an overview of significant findings and actions you have taken to improve student outcomes.
 - c. Disaggregate and compare student learning outcomes assessment results by instructional modality (face-to-face vs. online).
11. If a CTE program, provide a list of the committee members of your Advisory Committee, the chair's name, and the meeting schedule (i.e., twice yearly)
- a. Summarize the recommendations from the Committee
 - b. Describe changes that have been made to the program as a result of the committee's recommendations
12. If a CTE program, please discuss your labor market information [{link}](#).
13. Please refer to your program's data report provided by the Institutional Effectiveness and Student Equity Office (if you need additional data, contact Brianna.Hays@gcccd.edu) and address the following:

PLEASE NOTE: *For any data, charts or graphs you include provide an explanation of their significance and how it informs practice*

- a. The demographics of your students and implications for practice (*how you are responding to the needs of our changing demographics; please address gender, ethnicity, and age, and then the additional demographics that are applicable to your program planning*)
 - b. Key Performance Indicators (KPIs) for overall program outcomes and implications for practice. Disaggregate data based on instructional modality (face-to-face vs. online):
 - i. Enrollment
 - ii. Retention (counts and rate)
 - iii. Success (counts and rate)
 - iv. Program GPA
 - c. Key Performance Indicators (KPIs) for Productivity and implications for practice:
 - i. Sections
 - ii. Enrollments
 - iii. Capacity
 - iv. Fill rates
 - v. FTEF (optional)
 - vi. Load
 - vii. FTES (optional)
14. Discuss other data relevant to your program (*may vary by program*).
15. Describe your program's strengths.
16. Describe your program's challenges.
17. Describe external influences that affect your program (*both positively and negatively*).
18. Describe your program's vision for the future. *Please provide short- (3 years or less) and long-term (4-6 years) goals.*

Previous Goals: Update (If Applicable)

If you set goals in your last Comprehensive Program Review **or previous program review update**, please provide a status update, a summary of key action steps, and the results of these actions (if applicable). List previous goals as needed.

Goal 1: [Click here to enter text.](#)

Link to [College Strategic Goal](#): Basic Skills Acceleration Guided Student Pathways
 Student Validation and Engagement Organizational Health

Rationale: [Click here to enter text.](#)

Action Steps (Previously "Activities"): [Click here to enter text.](#)

Status: In Progress Completed Not Started Deleted
Is the program requesting resources to achieve this goal? Yes - See Section VI No
Evaluation Plan/Results: [Click here to enter text.](#)

Goal 2: [Click here to enter text.](#)

Link to [College Strategic Goal](#): Basic Skills Acceleration Guided Student Pathways
 Student Validation and Engagement Organizational Health

Rationale: [Click here to enter text.](#)

Action Steps (Previously "Activities"): [Click here to enter text.](#)

Status: In Progress Completed Not Started Deleted
Is the program requesting resources to achieve this goal? Yes - See Section VI No
Evaluation Plan/Results: [Click here to enter text.](#)

New Goals (If Applicable)

If your program is proposing any new goals that were not addressed in your last Comprehensive Program Review or previous program review update, please state the new goal(s), summarize key action steps, and describe your plan to evaluate the outcomes/results of these actions.

New Goal 1: [Click here to enter text.](#)

Link to [College Strategic Goal](#): Basic Skills Acceleration Guided Student Pathways
 Student Validation and Engagement Organizational Health

Rationale: [Click here to enter text.](#)

Action Steps (Previously "Activities"): [Click here to enter text.](#)

Is the program requesting resources to achieve this goal? Yes - See Section VI No
Evaluation Plan: [Click here to enter text.](#)

New Goal 2: [Click here to enter text.](#)

Link to [College Strategic Goal](#): Basic Skills Acceleration Guided Student Pathways
 Student Validation and Engagement Organizational Health

Rationale: [Click here to enter text.](#)

Action Steps (Previously "Activities"): [Click here to enter text.](#)

Is the program requesting resources to achieve this goal? Yes - See Section VI No
Evaluation Plan: [Click here to enter text.](#)

Position Requests (If Applicable)

Faculty Position Requests: *For faculty position requests, please complete the [Faculty Position Request Form {link}](#).*

Description: [Click here to enter text.](#)

Related Program Goal: [Click here to enter text.](#)

Description: [Click here to enter text.](#)

Related Program Goal: [Click here to enter text.](#)

Classified Staff Position Requests: For classified position requests, please complete the **Classified Staff Position Request Form {link}**

Description: Click here to enter text.

Related Program Goal: Click here to enter text.

Description: Click here to enter text.

Related Program Goal: Click here to enter text.

Resource Requests (If Applicable)

Technology Requests: For technology requests, please complete the **Technology Request Form {link}**.

Description: Click here to enter text.

One Time On-going

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Description: Click here to enter text.

One Time On-going

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Perkins Requests and Strong Workforce: For Perkins requests, please complete the **Perkins Request Form {link}**.

Description: Click here to enter text.

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Description: Click here to enter text.

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Supplies/Equipment Requests: Supplies and equipment requests will be considered on a one-time funding basis.

Description: Click here to enter text.

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Description: Click here to enter text.

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Facilities Requests: For facilities requests, please complete the **Facilities Request Form {link}**.

Description: Click here to enter text.

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Description: Click here to enter text.

Amount Requested \$ Click here to enter text.

Related Program Goal: Click here to enter text.

Professional Development Requests: For professional development requests, please complete the **Professional Development Request Form** [{link}](#).

Description: Click here to enter text.
Amount Requested \$ Click here to enter text.
Related Program Goal: Click here to enter text.

Description: Click here to enter text.
Amount Requested \$ Click here to enter text.
Related Program Goal: Click here to enter text.

Other Resource Requests: Other resource requests will be considered on a one-time funding basis. Please fill in the information below.

Description: Click here to enter text.
Amount Requested \$ Click here to enter text.
Related Program Goal: Click here to enter text.

Description: Click here to enter text.
Amount Requested \$ Click here to enter text.
Related Program Goal: Click here to enter text.