

**BASIC PROGRAM INFORMATION**

*Program Review is about documenting the discussions and plans you have for improving student success in your program and sharing that information with the college community. It is also about linking your plans to decisions about resource allocations. With that in mind, please answer the following questions.*

**Department Name:**

**Division Name:**

Please list all team members who participated in this Program Review:

Name	Department	Position

**Number of Full Time Faculty:**  **Number of Part Time Faculty:**

**Please list all existing Classified positions:** *Example: Administrative Assistant I*

List all departments covered by this review and indicate the appropriate program type.

	<input type="checkbox"/> Certificate	<input type="checkbox"/> AA / AS	<input type="checkbox"/> AD-T	<input type="checkbox"/> Pathway
	<input type="checkbox"/> Certificate	<input type="checkbox"/> AA / AS	<input type="checkbox"/> AD-T	<input type="checkbox"/> Pathway
	<input type="checkbox"/> Certificate	<input type="checkbox"/> AA / AS	<input type="checkbox"/> AD-T	<input type="checkbox"/> Pathway
	<input type="checkbox"/> Certificate	<input type="checkbox"/> AA / AS	<input type="checkbox"/> AD-T	<input type="checkbox"/> Pathway
	<input type="checkbox"/> Certificate	<input type="checkbox"/> AA / AS	<input type="checkbox"/> AD-T	<input type="checkbox"/> Pathway

**SECTION 1.1: SERVICE AREA DATA**

**1.1A. Service Area Data:**

	2013-2014	2014-2015	2015-2016
<b>Number of Students Served</b>			
<b>Full-Time Load (FTEF)</b>			
<b>Part-Time Load (FTEF)</b>			

**1.1B. Student Service Trend:**

Students Served (Over Past 3 Years):  Increase  Steady/No Change  Decrease

**1.1C. Student Demographics:** Please describe service trends for the following student groups, comparing the current program-level data with previous data (past 3 years).

	Increase	Steady/No Change	Decrease
African American	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filipino	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Latino/a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native American	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decline to State	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Male	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Female	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<25 Years Old	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
>25 Years Old	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**1.1D. Equity:** One of the goals of the College’s Student Equity plan is to close the performance gap for disproportionately impacted students, including African-American, Hispanic/Latino, and Filipino/Pacific Islanders. If your service trend for these students (or other groups not listed above, such as foster youth, veterans, and students with disabilities) is declining, what is your program doing to address this?

**1.1E. Service Area:** How has assessment and reflection of service-area Student Learning Outcomes (SA-SLOs) led to program changes and/or improvements?

**1.1E. SA-SLOs:** If your program’s SA-SLOs are not being met, please discuss your program objectives aimed at addressing this.

**SECTION 1.2: INSTRUCTIONAL PROGRAM DATA & ENROLLMENT**

If your program has an instructional component, please complete Section 1.2.  
 If your program does not have an instructional component, please skip to Section 2.

**1.2A. Transcriptable Program Data:** Data will be posted on Institutional Research’s website for all measures except non-transcriptable completion. You must manually copy data in the boxes below for every degree or certificate of achievement covered by this program review.

Transcriptable Program	2013-2014	2014-2015	2015-2016

**1.2B. Non-Transcriptable Program Data:** Please provide any non-transcriptable completion data you have available. Institutional Research does not track this data; you are responsible for tracking this data.

Non-Transcriptable Program	2013-2014	2014-2015	2015-2016

Please provide the rationale for offering a non-transcriptable program and share the most recent program completion data.

**1.2C. Department Level Data:**

	2013-2014	2014-2015	2015-2016
<b>Enrollment</b>			
<b>Productivity</b>			
<b>Course Success</b>			
<b>Full-Time Load (FTEF)</b>			
<b>Part-Time Load (FTEF)</b>			

**1.2D. Enrollment Trend:**

Program Enrollment (Over Past 3 Years):  Increase  Steady/No Change  Decrease

**1.2E. Course Success Trends:** Please describe course success trends for the following student groups and compare the program-level data with the college-level data.

	Program-Level Trend			College-Level Comparison		
	Increase	Steady/No Change	Decrease	Above	At Level	Below
African American	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Filipino	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Latino/a	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Native American	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
White	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decline to State	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**1.2F. Course Success Demographics:** Please compare the program-level course success rate data for the following student groups with the college-level data.

- Male:  Above Level  At Level  Below Level  
 Female:  Above Level  At Level  Below Level  
 <25 Years Old:  Above Level  At Level  Below Level  
 >25 Years Old:  Above Level  At Level  Below Level

**1.2G. Equity:** One of the goals of the College’s Student Equity plan is to close the performance gap for disproportionately impacted students, including African-American, Hispanic/Latino, and Filipinos/Pacific Islanders. If the course success rates for these students (or other groups not listed above, such as foster youth, veterans, and students with disabilities) is below that of the College, what is your program doing to address this?

**1.1H Course Enrollment:** If there are particular courses that are not getting sufficient enrollment, are regularly cancelled due to low enrollment, or are not scheduled, discuss how your program is addressing this issue.

**1.1I. Productivity:** Although the college productivity goal is **535**, there are many factors that affect productivity (i.e. seat count / facilities / accreditation restrictions).

Program Productivity Trend:  Increase  Steady/No Change  Decrease

Program Productivity (Compared to College Goal):  Above Goal  At Goal  Below Goal

Please discuss what factors may be affecting your program's productivity.

If your program's productivity is below that of the College, please discuss your program objectives aimed at addressing this.

**1.1J. Institutional Standard:** This represents the lowest course completion (success) rate deemed acceptable by the College's accrediting body (ACCJC). The institutional standard is **57%**.

Program Level Course Completion:  Above Standard  At Standard  Below Standard

Targeted Student Course Completion:  Above Standard  At Standard  Below Standard

Online Student Course Completion:  Above Standard  At Standard  Below Standard

In-Person/Hybrid Course Completion:  Above Standard  At Standard  Below Standard

**1.1K. Institutional Effectiveness (IEPI) Goal:** This represents an aspirational goal for course completion (success) rates; all programs should strive to reach/surpass this goal. The IEPI goal is **77%**.

Program Level Course Completion:  Above Goal  At Goal  Below Goal

Targeted Student Course Completion:  Above Goal  At Goal  Below Goal

Online Student Course Completion:  Above Goal  At Goal  Below Goal

In-Person/Hybrid Course Completion:  Above Goal  At Goal  Below Goal

Please comment on your program's efforts to continually improve course completion (success) rates, especially for students with basic skills needs.

If your program's course completion (success) rates are below the institutional standard (see above), please discuss your program objectives aimed at addressing this.

**1.1L. Faculty Discussion:** Does meaningful dialogue currently take place in shaping, evaluating, and assessing your program's Student Learning Outcomes (SLOs)?  Yes  No

If yes, in what venues do these discussions take place? (Check all that apply)

Department Meetings  Opening Day  Online Discussions  Other:

If no, please discuss what is missing and/or the obstacles to ensuring dialogue takes place.

**1.1M. Course-Level:** How has assessment and reflection of CL-SLOs led to course-level changes?

If your program's CL-SLOs are not being met, please indicate your program objectives aimed at addressing this.

**SECTION 2: SUMMARY OF PROGRAM OBJECTIVES & RESOURCE REQUESTS**

**2A. Past Program Objectives/Outcomes:** Please list program objectives (not resource requests) from past program reviews and provide an update by checking the appropriate status box.

	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal
	Year:	<input type="checkbox"/> Completed	<input type="checkbox"/> Ongoing	<input type="checkbox"/> No Longer a Goal

Please comment on any challenges or obstacles with ongoing past objectives.

Please provide rationale behind any objectives that are no longer a priority for the program.

**2B. New Program Objectives:** Please list all new program objectives discussed in Section 1; do not list resource requests in this section.

Program Objective	Implementation Timeline	Progress Measures
<i>Example: Reduce Wait Time for Counselors</i>	<i>Winter 2016 Term</i>	<i>Student Surveys</i>

**2C. EMP Goals.** Please refer to the Educational Master Planning (EMP) [website](#) for more information. Indicate which EMP goals are supported by your program objectives (Check all that apply).

- Create a culture of equity that promotes student success, particularly for underserved students.
- Strengthen a sense of community and commitment to the College’s mission; expand participation from all constituencies in shared governance.
- Recognize and support a campus culture that values ongoing improvement and stewardship of resources.

**2D. Resource Requests:** Using the table below, summarize your program’s unfunded resource requests. Refer to the Operations Planning Committee (OPC) [website](#) for current guiding principles, rubrics and resource allocation information. Be sure to mention the resource request in your narrative above when discussing your program so the request can be fully vetted.

Resource Request	\$	Program Objective (Section 2B)	Type of Resource Request			
			Full-Time Faculty/Staff	One-Time B-Budget	Ongoing B-Budget	Facilities and

			Position	Augmentation	Augmentation	Equipment
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**2E. Unbudgeted Reassigned Time:** Please list and provide rationale for requested reassign time.

**2F. Review:** Review the resource requests that were granted over the last three years and provide evidence that the resource allocations supported your goals and led to student success.

**SECTION 3: PROGRAM SUMMARY**

**3A. Prior Feedback:** Address the concerns or recommendations made in prior program review cycles, including any feedback from the Dean/VP, Program Review Committee (PRC), etc.

Concern/Recommendation	Comments

**3B. Summary:** What else would you like to highlight about your program (e.g. innovative initiatives, collaborations, community service/outreach projects, etc.)?

**SECTION 4: LEARNING OUTCOMES ASSESSMENT SUMMARY**

**4A. Attach 2015-2016 Service-Area Outcomes:** Four Column Report for SA-SLO Assessment from TracDat. Please contact the Office of Instruction to assist you with this step if needed.

**4B. Attach 2015-2016 Course-Level Outcomes:** Four Column Report for CL-SLO Assessment from TracDat. Please contact the Office of Instruction to assist you with this step if needed.

**SECTION 5: FEEDBACK AND FOLLOW-UP**

This section is for the Dean/Supervising Administrator to provide feedback.

**5A. Strengths and successes of the program as evidenced by the data and analysis:**

**5B. Areas of concern, if any:**

**5C. Recommendations for improvement:**

**5D. Recommended Next Steps:**

- Proceed as Planned on Program Review Schedule
- Further Review / Out-of-Cycle In-Depth Review

**This section is for the Vice President/President to provide feedback.**

**5E. Strengths and successes of the program as evidenced by the data and analysis:**

**5F. Areas of concern, if any:**

**5G. Recommendations for improvement:**

**5H. Recommended Next Steps:**

- Proceed as Planned on Program Review Schedule
- Further Review / Out-of-Cycle In-Depth Review

*Upon completion of Section 5, the Program Review document should be returned to department faculty/staff for review, then submitted to the Office of Instruction and Institutional Research for public posting. Please refer to the Program Review timeline.*