



Comprehensive Program Review Feedback Form – Curriculum Committee

Program Communication Studies **Division** Humanities/Social Sciences

Curriculum Committee
Member(s) Reviewers Lorraine Barrales-Ramirez **Date**
Reviewed 5/14/13

The purpose of this form is to provide feedback to the Department/Program.

I. Program Learning Outcomes Assessment Cycle (PLOs)	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Reviewed 5-year data and identified changes that occurred in the program as a result of PLO assessment cycle.	Click here to enter text.	yes	Click here to enter text.	Click here to enter text.
2. Explained how the assessment plan for PLOs measured quality and success of each program.	Click here to enter text.	Yes. Refers to TracDat	Click here to enter text.	Click here to enter text.
3. Summarized assessment results of PLOs.	Click here to enter text.	yes	Click here to enter text.	Click here to enter text.
4. Described and summarized other data that reveals program performance.	no	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: Click here to enter text.				

II. Curriculum offerings and Student Learning Outcomes Assessment Cycle (SLOs)	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Provided TracDAT and CurricUNET data in the appendix.	Could not determine if it was available.	Click here to enter text.	Click here to enter text.	Click here to enter text.



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2. Identified patterns of curriculum offerings.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
3. Reviewed the 2-year curriculum cycle of course offerings to ensure timely completion of certificates and degrees.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
4. Identified strengths of the curriculum.	no	Click here to enter text.	Click here to enter text.	Click here to enter text.
5. Identified issues and possible solutions.	Click here to enter text.	yes	Click here to enter text.	Click here to enter text.
6. Identified plans for future curricular development and/or program modification.	Indicated none needed	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: Click here to enter text.				

III. Program Level Data	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Reviewed 5-year data to describe trends in student success, retention, demographics.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
2. Analyzed trends and discussed plans to address significant findings.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
3. Identified changes in business, community and employment needs, new technology, and new transfer requirements could affect the Program.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

IV. Action Plan	Incomplete	Complete	Complete	Complete
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	information	information, some analysis	information, analysis	information, analysis, plan
1. Identified reflections on Department/ Program needs and goals.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
2. Identified an action plan as a focus of inquiry for the next year.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

Va. Faculty and Staff hiring needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Justification is consistent with accurate data and fits Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

Vb. Professional Development needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Identified professional development activities that faculty and staff participated in the past 6 years and	Click here to enter text.	Listed only the one year	Click here to enter text.	Click here to enter text.
2. Identified how professional development improved student learning outcomes (SLOs).	no	Click here to enter text.	Click here to enter text.	Click here to enter text.
3. Identified professional development plans for next years.	no	Click here to enter text.	Click here to enter text.	Click here to enter text.
4. Justification is consistent with Department/Program needs.	no	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: Click here to enter text.				



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Vc. Classroom and Instructional Equipment needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Completed source/cost information (item description, suggested vendor, number of items, total cost).	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
2. Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

Vd. Office of Planning, Research & Student Success data needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

Ve. Facility needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

VI. Executive Summary	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
1. Identified program vision and mission	Click here to	Click here to	Click here to	yes



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	enter text.	enter text.	enter text.	
2. Identified program strengths.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
3. Identified program challenges.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
4. Identified action plan summary	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

Other/General Comments:
Click here to enter text.

Curriculum Committee Chair Signature *Shirley C. Squire* Date 5/17/13

VPI Signature *[Signature]* Date 5/20/13