



**Comprehensive Program Review Feedback Form – Curriculum Committee**

**Program** Sociology **Division** Humanities/Social Sciences

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

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

<b>I. Program Learning Outcomes Assessment Cycle (PLOs)</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
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.	Click here to enter text.	Click here to enter text.	yes
2. Explained how the assessment plan for PLOs measured quality and success of each program.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
3. Summarized assessment results of PLOs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
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.				

<b>II. Curriculum offerings and Student Learning Outcomes Assessment Cycle (SLOs)</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
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.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
5. Identified issues and possible solutions.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
6. Identified plans for future curricular development and/or program modification.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
Comments/Questions: Click here to enter text.				

<b>III. Program Level Data</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
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.				

<b>IV. Action Plan</b>	<b>Incomplete</b>	<b>Complete</b>	<b>Complete</b>	<b>Complete</b>
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	<b>information</b>	<b>information, some analysis</b>	<b>information, analysis</b>	<b>information, analysis, plan</b>
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
<b>Comments/Questions:</b> Click here to enter text.				

<b>Va. Faculty and Staff hiring needs</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
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
<b>Comments/Questions:</b> Click here to enter text.				

<b>Vb. Professional Development needs</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
1. Identified professional development activities that faculty and staff participated in the past 6 years and	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
2. Identified how professional development improved student learning outcomes (SLOs).	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
3. Identified professional development plans for next years.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
4. Justification is consistent with Department/Program needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	yes
<b>Comments/Questions:</b> Click here to enter text.				

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<b>Vc. Classroom and Instructional Equipment needs</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
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.	Click here to enter text.
2. Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: None listed				

<b>Vd. Office of Planning, Research &amp; Student Success data needs</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
1. Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: None listed				

<b>Ve. Facility needs</b>	<b>Incomplete information</b>	<b>Complete information, some analysis</b>	<b>Complete information, analysis</b>	<b>Complete information, analysis, plan</b>
1. Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: None listed				

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



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	enter text.	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.	Click here to enter text.
3. Identified program challenges.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
4. Identified action plan summary	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: Not included				

**Other/General Comments:**  
Click here to enter text.

Curriculum Committee Chair Signature

*[Handwritten Signature]*

Date

*5/17/13*

VPI Signature

*[Handwritten Signature]*

Date

*5/20/13*