

| Program Library | | Division | Office of Instru | ction |
|--|---------------------------|---|--------------------------------|--------------------------------------|
| IPC Member(s) Reviewers Alicia Aguirre & Linda H | łayes | , | Date Reviewed | 4/18/14 |
| The purpose of this form | is to provide fee | dback to the Depa | rtment/Program | • |
| I. Curriculum Offerings | Incomplete information | Complete information, some analysis | Complete information, analysis | Complete information, analysis, plan |
| Guidelines: This section should include th | e following: | | | |
| Status of curriculum updates for all courses. | Click here to enter text. | Click here to enter text. | Click here to enter text. | XXX |
| 2. Status of SLOAC for all courses. | Click here to enter text. | Click here to enter text. | Click here to enter text. | XXX |
| 3. A description of the complete curriculum offering cycle. | Click here to enter text. | Click here to enter text. | Click here to enter text. | XXX |
| A plan for necessary curriculum development. | XXX | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Comments/Questions: #4 not addressed in APP. | | | | |
| II. Program Level Data | Incomplete information | Complete information, some analysis | Complete information, analysis | Complete information, analysis, plan |
| Guidelines: The data is prepared by the Of This section should include the following: | ffice of Research o | | s to be attached to | this document. |
| 1. Identification of trends on data packets. | Click here to enter text. | Click here to enter text. | Click here to enter text. | XXX |
| 2. Identification of program performance. | Click here to enter text. | Click here to enter text. | Click here to enter text. | XXX |



| 3. Identification of PLOs (Program Learning Outcomes) assessment plan. | X | Click here to enter text. | Click here to enter text. | Click here to enter text. |
|--|---|---------------------------|---------------------------|---------------------------|
| Analysis of PLOs (Program Learning Outcomes) results. | X | Click here to enter text. | Click here to enter text. | Click here to enter text. |

Libr 100 is not a program so it is difficult to measure at the PLO level.

| III. Action Plan | Incomplete information | Complete information, some analysis | Complete information, analysis | Complete information, analysis, plan |
|---|---------------------------|-------------------------------------|--------------------------------|--------------------------------------|
| Guidelines: This section should include the | e following: | | | |
| Reflections on Department/ Program needs and goals. | Click here to enter text. | X | Click here to enter text. | Click here to enter text. |
| 2. An action plan for what is to be accomplished for the next year. | Click here to enter text. | X | Click here to enter text. | Click here to enter text. |

Comments/Questions:

#s 1 & 2: Need to review and update action plan based on current status.

| IVa | . Faculty and Staff hiring needs | Incomplete information | Complete information, some analysis | Complete information, analysis | Complete information, analysis, plan |
|-----|---|--------------------------------------|--------------------------------------|-----------------------------------|--------------------------------------|
| Dep | delines: The request should explain clo artment/Program/Division/College neo ncluded. | early and with supeds. Information f | pporting data how in the most recent | it will serve at comprehensive | program should |
| | Justification is consistent with accurate data. | Click here to enter text. | X | Click here to enter text. | Click here to enter text. |
| | Justification fits Department/Division/College needs. | Click here to enter text. | X | Click here to enter text. | Click here to enter text. |
| Con | nments/Questions: | s and request. | | | ····· |



Guidelines: The request should explain clearly how it will serve Department/Program/Division/College needs

Complete

information.

Click here to

Complete

information,

Click here to

enter text.

some analysis

some analysis

Complete

analysis

information;

Click here to

Complete

analysis

information,

Click here to

enter text.

Complete

information,

Click here to

Complete

information,

Click here to

enter text.

analysis, plan

analysis, plan

Incomplete

information

X

| Department/Program needs. | | enter text. | enter text. | enter text. |
|--|------------------------|-------------------------------------|--------------------------------|--------------------------------------|
| Comments/Questions: Need to address professional develo | pment plans for next y | /ear. Please explair | how professiona | l development |
| IVc. Classroom and Instructional Equipment needs | Incomplete information | Complete information, some analysis | Complete information, analysis | Complete information, analysis, plan |
| Guidelines: The request should exploneeds including Item description, Nur | | | artment/Program | /Division/College |
| Complete source/cost information (item description, suggested vend number of items, total cost). | ľ | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| 2. Justification is consistent with Department/Division/College nee (uses previous program plan information). | eds X | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Comments/Questions: Need to specify vendor information f | or equipment request | s and need to give | iustification. | |

Incomplete

information

Χ

Guidelines: The request should explain clearly how the request will serve Department/Program/Division/College

Comments/Questions:

No mention of any research needed.

Department/Division/College needs.

IVd. Office of Planning, Research &

Student Success data needs

Justification is consistent with

IVb. Professional Development needs

Justification is consistent with



| IVe. Facility needs | | Incomplete information | Complete information, some analysis | Complete information, analysis | Complete information, analysis, plan |
|-------------------------------------|----------------|------------------------|-------------------------------------|--------------------------------|--------------------------------------|
| Guidelines: The request shou needs. | ld explain cle | arly how the requ | uest will serve Dep | artment/Program | /Division/College |
| Justification is consistent with | | Click here to | Click here to | Click here to | Х |
| Department/Division/College | needs. | enter text. | enter text. | enter text. | |
| Comments/Questions: | A115 | | | | |
| None mentioned. | | | | | |
| In the future, please use the f | om and reav | e an questions in | place as and is | | |
| IPC Co-Chair Signature | Cawl | Rhodeb | S | Date 4-7 | 5-14 |
| VPI Co-Chair Signature | flant | 1/h | | Date 25- | 4-2014 |