

## Annual Program Plan/Review Feedback Form - IPC

Program C	оор	Division Business and Workforce	
IPC Member Reviewers	r(s) Anniqua Rana	Date C40/42	
Keyteners	Anniqua Naria	Reviewed 5/10/13	
	The purpose of this form is to pro	ovide feedback to the Department/Program.	

1. Curriculum Offerings	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Candelines: This section should include to	he following:			) anatons, par
Status of curriculum updates for all courses.	Click here to enter text.	Two courses in this program. More analysis needed.	Click here to enter text.	Click here to enter text
2. Status of SLOAC for all courses.	Click here to enter text	Completed but no analysis	Chck here to enter text.	Click here to enter text.
A description of the complete curriculum offering cycle.	Not included	Click here to enter text	Click here to enter text.	Chck here to enter text
A plan for necessary curriculum development.	No planning included	Click here to enter text.	Click here to enter text	Click here to enter text
Comments/Questions:			and the second s	

II. Program Level Data	lucomplete information	Complete information, some analysis	The form of the control of the contr	Complete information, analysis, plan
Guidelines: The data is prepared by This section should include the fallos	wing:	h and Planning and	d is to be attach	ed to this document.
1. Identification of trends on data pac	ekets. Alick here to	Click here to	Analysis	Circk here to



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	enter text.	enter text.	regarding technology and workforce trends would be helpful	enter text.
2. Identification of program performance.	Click here to enter text.	More information needed regarding program performance	Click here to enter text.	Click here to enter text.
Identification of PLOs (Program Learning Outcomes) assessment plan.	PLOs and assessment plan not included	PLOs not included	Click here to enter text.	Click here to enter text.
<ol> <li>Analysis of PLOs (Program Learning Outcomes) results.</li> </ol>	Not included		Click here to enter text.	Click here to enter text.
Comments/Questions: Click here to enter text.	<u> </u>			

III. Action Plan	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: This section should include th	e following:			
Reflections on Department/ Program needs and goals.	Not included	Chick here to enter text.	Click here to enter text	Chick here to enter text
2. An action plan for what is to be accomplished for the next year.	Not included	Click here to enter text	Clark here to enter text	Click here to enter text
Comments/Questions: Cress turns to enter text				

IVa. Faculty and Staff hiring needs In	
	complete Complete Complete



Annual Program Plan/Review Feedback Form - IPC information information, information. information, some analysis analysis analysis, plan Guidelines: The request should explain clearly and with supporting data how it will serve Department Program Division College needs. Information from the most recent comprehensive program should be included. 1. Justification is consistent with N/A Click here to Click here to Click here to accurate data. enter text. enter text enter text Justification fits N/A Click here to

enter text.

Click here to

enter text

Click here to

enter text

Comments/Questions:

Click here to enter text.

Department/Division/College needs.

IVb. Professional Development needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: The request should explain cl	early how it will s	erve Department/I	rogram/Division	College needs
Justification is consistent with Department/Program needs.	Not included	Click here to enter text	Click here to enter text.	Click here to enter text
Comments/Questions: Click bere to enter text				

IVc. Classroom and Instructional Equipment needs	incomplete information	Complete information, some analysis	Complete Information, analysis	Complete information, analysis, plan
Guidelines. The request should explain cl needs including Item description, Number	early how the requ of Hems, Total Co	Sf	sartment Program	Division/College
L. Complete source cost information (item description, suggested vendor, number of items, total cost).	NA	Click here to enter text.	Click here to enter text.	Click here to enter lexi



Annual Program Plan/Review Feedback Form - IPC Justification is consistent with NA Click here to Click here to Click here to Department/Division/College needs enter text. enter text. enter text. (uses previous program plan information). Comments/Questions: Click here to enter text. IVd. Office of Planning, Research & Incomplete Complete Complete Complete Student Success data needs information information, information. information. some analysis analysis analysis, plan Guidelines: The request should explain clearly how the request will serve Department/Program/Division/College needs. Justification is consistent with Not included Click here to Click here to Click here to Department/Division/College needs. enter text. enter lext. enter text Comments/Questions: Clair nere to enter best IVe. Facility needs Incomplete Complete Complete Complete information Information. information. information. some analysis analysis aualysis, plan Guidelines: The request should explain clearly how the request will serve Department/Program Division College Justification is consistent with NA Click here to Click here to Clark here to Department/Division/College needs. enter text. enter text. enter text. Comments Questions: ( took there to essing leat Other/General Comments: Click here to enter text.



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IPC Co-Chair Signature	Carol Rhodys	Date 3/23//3			
VPI Co-Chair Signature	4	Date			