

Annual Program Plan/Review Feedback Form - IPC

Program Kinesiology	Division	Business, Work Athletics	force &	
IPC Member(s) Reviewers Anniqua Rana, Keri Ferrari, Jonna Pounds		Date Reviewed	5/10/13	

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

I. Curriculum Offerings	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: This section should include t	he following:			panatyois, pian
Status of curriculum updates for all courses.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Most curriculum has been updated; includes new courses
Status of SLOAC for all courses.	SLOAC status not clear	Click here to enter text.	Click here to enter text.	Click here to enter text.
 A description of the complete curriculum offering cycle. 	Click here to enter text.	Click here to enter text.	Click here to enter text.	Described curriculum needed to complete cycle
A plan for necessary curriculum development.	Click here to enter text.	Click here to enter text.	Developed curriculum to address Title V repeatability issue	Click here to enter text.
Comments/Questions: lick here to enter text.			issue	

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	flice of Research	and Planning and	is to be attached	1 . /
This section should include the following: I Identification of trends on data packets.	Click here to	The state of the s	is to be unachea t	o this document.



Annual Program Plan/Review Feedback Form - IPC enter text. identified with enter text. analysis 2. Identification of program performance. Click here to Click here to Click here to Discussed enter text. enter text. enter text. performance data 3. Identification of PLOs (Program Click here to Click here to Click here to Assessment Learning Outcomes) assessment plan. enter text. enter text. enter text. plan included Analysis of PLOs (Program Learning Click here to Click here to Click here to **PLO** results Outcomes) results. enter text. enter text. enter text. included Comments/Questions: Click here to enter text.

	I. Action Plan	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Gi	idelines: This section should include th	e following:			
1.	Reflections on Department/ Program needs and goals.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Needs and goals include facilities improvement and new FT hires
2.	An action plan for what is to be accomplished for the next year.	Does not clearly address this	Click here to enter text.	Click here to enter text.	Click here to enter text.

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IVa. Faculty and Staff hiring needs	Incomplete	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. Justification is consistent with Click here to Click here to Click here to Consistent accurate data. enter text. enter text. enter text. with included data 2. Justification fits Click here to Click here to Click here to Click here to Department/Division/College needs. enter text. enter text. enter text. enter text. Comments/Questions: The indication is the department will grow only with additional FT hires

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	Program/Division	College needs
Justification is consistent with Department/Program needs. Comments/Questions:	Click here to enter text.	Click here to enter text.	Training seminars and conferences listed per individual faculty	Click here 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	of Items Total Co	net	a mem/rrogram	Division/College
Complete source/cost information (item description, suggested vendor,	Click here to enter text.	Click here to	Click here to enter text.	Equipment list is complete, all



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2. Justification is consistent with Department/Division/College needs (uses previous program plan information).

Click here to enter text.

IVd. Office of Planning, Research & Student Success data needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: The request should explain cl needs.	learly how the requ	est will serve Dep	artment/Program	Division/College
Justification is consistent with Department/Division/College needs.	Nothing under this category	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.				

IVe. Facility needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information,
Guidelines: The request should explain needs.	clearly how the requ	uest will serve Dep	artment/Program	analysis, plan Division/College
Justification is consistent with Department/Division/College needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Facility needs described with justification included
Comments/Questions: Renovation of Building 1 has been on the	table for a while no	ow		

Other/General Comments:	
Click here to enter text.	



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IPC Co-Chair Signature	Carol Rhodes	Date _5/23//3-
VPI Co-Chair Signature	1	Date