Cañada College

Annual Program Plan/Review Feedback Form - IPC

Program Physics and Astronomy   **Division** Science

IPC Member(s)
Reviewers Denise Erickson   **Date Reviewed** 5/8/13

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 the following:				
1. Status of curriculum updates for all courses.	Click here to enter text.	x	Click here to enter text.	Click here to enter text.
2. Status of SLOAC for all courses.	Click here to enter text.	x	Click here to enter text.	Click here to enter text.
3. A description of the complete curriculum offering cycle.	Click here to enter text.	x	Click here to enter text.	Click here to enter text.
4. A plan for necessary curriculum development.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Comments/Questions: No plan submitted				

II. Program Level Data	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: The data is prepared by the Office of Research and Planning and is to be attached to this document. This section should include the following:				
1. Identification of trends on data packets.	Click here to	x	Click here to	Click here to

	enter text.		enter text.	enter text.
2. Identification of program performance.	Click here to enter text.	Click here to enter text.	x	Click here to enter text.
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.
4. Analysis of PLOs (Program Learning Outcomes) results.	x	Click here to enter text.	Click here to enter text.	Click here to enter text.

Comments/Questions:
No PLO assessment or analysis

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

Comments/Questions:
Needs more specific information about what is to be accomplished for next year.

IVa. Faculty and Staff hiring needs	Incomplete information	Complete information,	Complete information,	Complete 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 accurate data.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
2. Justification fits 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:
No requests.

IVb. Professional Development needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: The request should explain clearly how it will serve Department/Program/Division/College needs				
Justification is consistent with Department/Program needs.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

Comments/Questions:
No requests

IVc. Classroom and Instructional Equipment needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: The request should explain clearly how the request will serve Department/Program/Division/College needs including Item description, Number of Items, Total Cost				
1. Complete source/cost information (item description, suggested vendor, number of items, total cost).	Click here to enter text.	x	Click here to enter text.	Click here to enter text.

2. Justification is consistent with Department/Division/College needs (uses previous program plan information).	Click here to enter text.	x	Click here to enter text.	Click here to enter text.

Comments/Questions:
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 clearly how the request will serve Department/Program/Division/College needs.				
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:
No requests

IVe. Facility needs	Incomplete information	Complete information, some analysis	Complete information, analysis	Complete information, analysis, plan
Guidelines: The request should explain clearly how the request will serve Department/Program/Division/College needs.				
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:
No requests

Other/General Comments:
Click here to enter text. *Was APP inadequate? I can't tell from this feedback form. CR*

IPC Co-Chair Signature   *C Rhodes*   Date 5/23/13

VPI Co-Chair Signature   Date 8/15/13