



Annual Program Review Update Form

Purpose of Form:

Since Program Review has become an integral part of the campus planning process, it is recognized that unforeseen circumstances arise that may cause portions of your program review to become outdated in a three-year cycle. Please submit an update since the last comprehensive three-year program review.

Program: _____

Division: _____

Please check one box:

Program is is not submitting an update for Program Review

Date: _____

Signatures: _____

PRC Endorsement: Yes No

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Request Justification

Briefly summarize what significant changes have occurred since the last comprehensive program review that result in this request.

What data supports these requests? Provide details.

What SLO Assessment or SAO findings, if any, support and guide the resource request?

If personnel related, are changes due to growth and/or retirements? If no, provide details.

How will the resource allocation specifically enhance your program's services, activities, processes, etc. to continue or improve student learning and achievement?

How will the resource enhance your area or program with respect to the College mission or Strategic initiatives, physical/organizational restructuring, and/or your program's goals for improvement as stated in your last program review?

Provide any other information that supports your request in the space below.

Append any data to support the request after page 2.

Use this section ONLY if you have a NEW resource request

Requested by: _____ Email: _____ Phone _____

Division _____ Department _____ Total Requested \$ _____

This request is intended as an update to a previously submitted program review. List and provide the cost to implement this request.

1. Item: _____ Cost: _____

2. Item: _____ Cost: _____

3. Item: _____ Cost: _____

4. Item: _____ Cost: _____

Describe the location of the equipment and include a description of additional space and/or maintenance needed.

Annually what is the approximate number of students impacted directly or indirectly by this request? _____

Dean: Signature/approval _____

Date _____

Rank (if appropriate):

Dean Priority Ranking: _____ of _____

Do not write under this line

PRC: New request provides evidence of need and supports program improvement.

Yes _____

No _____