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**2020-21 Program Review – Administrative Unit**

**Program Overview**

Please verify the mission statement for your program. If there is no mission statement listed, please add it here.

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List your Faculty and/or Staff

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The Program Goals below are from your most recent Program Review or APU. If none are listed, please add your most recent program goals. Then, indicate the status of this goal, and which College and District goal your program goal aligns to. If your goal has been completed, please answer the follow up question regarding how you measured the achievement of this goal.

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Describe your current utilization of facilities, including labs and other space

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**Assessment**

Which Administrative Unit Outcomes (AUO) did you assess in the past year? What were the results? Please describe the assessment methods used. How did your work lead to program improvement, that is, the development of Program Improvement Objectives (PIO's) as a result of your assessment?

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What Administrative Unit Outcomes (AUO) and program improvement objectives (PIO) do you plan to work on in the next 2 years?

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Major Accomplishments

Please describe 1-3 major accomplishments below since completion of the previous program review.

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**Engagement**

How have the administrators and staff in this area been engaged in institutional efforts such as committees, presentations, and department activities? Please list the committees your staff participate in.

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Discuss how the administrators and staff have engaged in community activities, partnerships and/or collaborations.

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**Prioritized Resource Requests Summary**

In the boxes below, please add resource requests for your program. If there are no resource requested, leave the boxes blank.

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| **Resource Category** | **Description/Justification** | **Estimated Annual Salary Costs** | **Estimated Annual Benefits Costs** | **Total Estimated Cost** |
| **Personnel: Classified Staff** |  |  |  |  |
| **Personnel: Student Worker** |  |  |  |  |
| **Personnel: Part Time Faculty** |  |  |  |  |
| **Personnel: Full Time Faculty**  |  |  |  |  |

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| **Resource Category** | **Description/Justification** | **Total Estimated Cost** |
| **Professional Development: Department wide PD needed** |  |  |
| **Professional Development: Personal/Individual PD needed** |  |  |

**Prioritized Resource Requests Summary - Continued**

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| **Resource Category** | **Description/Justification** | **Total Estimated Cost** |
| **Supplies: Software** |  |  |
| **Supplies: Books, Magazines, and/or Periodicals** |  |  |
| **Supplies: Instructional Supplies** |  |  |
| **Supplies: Non-Instructional Supplies** |  |  |
| **Supplies: Library Collections** |  |  |

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| **Resource Category** | **Description/Justification** | **Total Estimated Cost** |
| **Technology & Equipment: New** |  |  |
| **Technology & Equipment: Replacement** |  |  |

**Prioritized Resource Requests Summary - Continued**

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| **Resource Category** | **Description/Justification** | **Total Estimated Cost** |
| **Facilities: Classrooms** |  |  |
| **Facilities: Offices** |  |  |
| **Facilities: Labs** |  |  |
| **Facilities: Other** |  |  |

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| **Resource Category** | **Description/Justification** | **Total Estimated Cost** |
| **Library: Library materials** |  |  |
| **Library: Library collections** |  |  |

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| **Resource Category** | **Description/Justification** | **Total Estimated Cost** |
| **OTHER** |  |  |