



College of the Siskiyous

Annual Program Review

Program Name: _____ Academic Year: _____

Person Completing Update: _____

Number of full-time faculty in the program: _____

Number of part-time faculty in the program: _____

Number of staff in the program (ex. Instructional Support Specialist): _____

Do the above numbers reflect any staffing changes? _____

Refer to the most recent Comprehensive Program Review, what were the identified actions for improvement? Identify any current and/or new strategies that have been implemented.

Describe your progress on assessing Student Learning Outcomes/Service Area Outcomes, and PLOs.

Discuss any support or obstacles encountered by the program.

Describe program budgetary needs or implications (Submit a Continuous Quality Improvement Proposal [CQIP] if you are requesting a budget allocation that falls outside of regular yearly budget allocations).

Closing the loop: In the last year, were any of your program CQIPs approved? If so, how did this additional budget allocation improve or support your program?

Reviewed by the Integrated Planning and Budget Committee on: _