**College of San Mateo**

Program Review Progress Report

2018-19

Program Name:

Program Contact:

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| **Program Review Section** | **Institutional Expectations** |
| **Summary of What Has Been Completed to Date** | **Schedule for Completing Remaining Work** |
| **Program Description & Mission Statement** |  |  |
| **Results of Previous Program Review** * **Results of previous plan**
* **Changes in Program**
* **Student Success/Equity**
* **Update on long term plans**
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| **Assessment &****Program Analysis and Trends*** **Data Review**
* **Identify and address opportunity gaps**
* **Program efficiency**
* **SLOs/SAOs reflect full cycle of assessment**
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| **Planning & Goal Setting*** **Actions, outcomes and timelines of goals**
* **Student success and equity**
* **Professional development**
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| **Staffing** |  |  |
| **Resource Request*** **Equipment &Technology**
* **Facilities**
* **Other**
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**Note: To be completed and returned to Division Dean by April 30, 2019**