

Academic Program Review
Assessment Year:

Program:
CIP Number:
Department:
College:
Accreditation (if applicable):
Program Director:
Contact Name:

Continuous Assessment Planning Process:

Participants in the Planning Process:

Learning Outcome 1:	
Instrument/Test 1:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 2:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 3:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:

Learning Outcome 2:	
Instrument/Test 1:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 2:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 3:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:

Learning Outcome 3:	
Instrument/Test 1:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 2:	Procedures:
	Criteria:
	Results and Analysis:

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Learning Outcome 3:	
	Use of Results:
Instrument/Test 3:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:

Learning Outcome 4:	
Instrument/Test 1:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 2:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results:
Instrument/Test 3:	Procedures:
	Criteria:
	Results and Analysis:
	Use of Results: