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Annual Assessment for UIW/SMSE academic programs									
Department:	Contact Person:	Academic Year <b>2017-2018</b>							
Program:	Email address:	Date:							
1. Program Mission Statement (MS) (From the most recent 5-year program review)									
		Program Goals (PGs)							
(PC	as should be linked and supporting	MS. Usually stated in the most	recent 5-year program review)						
	3. Stude	ent Learning Outcomes (SLOs)							
(SLOs should be linked and supporting MS and PGs, usually stated the most recent 5-year program review)									
4. Student Learning Outcomes assessed this year									
Student Learning	Achievement Targets	Assessment Results	Future Action Plans summary						
Outcomes to be assessed this year (filled Beginning of the year)	(filled Beginning of the year)	summary (filled at the end of the year)	(filled at the end of the year)						

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5. Specific items or objectives your program plans to achieve this academic year										
(You may use this space to assess selected program goals for the current year)										
Items to be assessed	Achievement Targets	rement Targets Assess		essment Results		Future Action Plans				
(filled Beginning of the	(filled Beginning of the year)	(fille	(filled at the end of th		(filled at the end of the year)					
year)										
6. Resources (Facility, faculty, financial, library, etc.)										
Resources needed to achieve the objectives			Resources your program were able to acquire this year and plan for							
(filled Beginning of the year)			the future (filled at the end of the year)							
7. Based on the past assessments, what changes have been made or actions have been taken this year to improve your program? (filled at the end of the year)										
Assessment results in the past Actions took this year				Results		Action plan for next year				
8. Comments or Suggestions on the assessment process (filled at the end of the year)										

Use Appendices if the space

Attach any supporting documents.