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**Summary Interim Program Assessment Report Feedback**

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| **Program/Degree** |  | **Reporting Year** | 2024 |
| **Department/College** |  | **Date Review Submitted** |  |

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| **Feedback** |  | | |
| **Strengths:** | | |
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| **Suggestions** | | |
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| **Issues of Note:** | | |
|  | **Score for interim program assessment report:** | | |
|  | The interim report is **ADVANCED**. The *proposed* assessment process appears to be effective and exceeded report planning standards by providing additional information about the assessment activities to take place in the next biennial reporting cycle that enhanced the comprehensiveness of the report. | The interim report is **SATISFACTORY**. The *proposed* assessment process meets expectations in report planning standards by summarizing assessment activities to take place in the next biennial reporting cycle. | The interim report is **DEVELOPING** and does not yet meet report planning standards. The *proposed* assessment process needs improvement because there are limitations that may yield an ineffective or incomplete report in the next biennial reporting cycle.  OR - Only a narrative cover sheet was submitted, in partial fulfillment of the interim report. |
| **Score** | ☐ | ☐ | ☐ |