Program Review Evaluator's Check Sheet

Progr	am		
Evaluated			
Name of			
Evaluator			
Date			
I. Program Review Issues: (Please indicate specific concerns about the content of the			
program review document and indicate R for recommended or M for mandatory changes.			
Attach separate page if needed.)			
R or M	1	Comments (Be specific)	
II. Editing/Style Changes : (Please be specific about the changes, including page numbers			
for eac	ch chang	e. Also, please indicate R for recommended/ M for mandatory. Attach f needed.)	
Page	R or M		
No.			
1.00			

III. Evaluator's Recommendation: (Please check one.)			
Continuation of program at the <u>current level of activity</u>.			
Continuation of program at reduced level of activity or with other <u>corrective action</u> :			
Progress report due by November 1 next academic year. (Program deficiencies			
that need to be corrected and issues addressed should be outlined)			
Continuation of the program with identification of the program for resource			
development: Progress report due by November 1 next academic year.			
(Program issues to be addressed should be outlined)			
Development of a cooperative program with another institution, or sharing of			
courses, facilities, faculty, and the like.			
Discontinuation of the program			
Note:			
<i>Corrective Action</i> will apply to programs that have deficiencies that the program itself can address and correct.			
<i>Resource Development</i> will apply to already viable programs that require additional			

resource Development will apply to already viable programs that require additional resources from the Administration to help achieve their full potential. This designation is considered an investment in a viable program as opposed to addressing issues of a weak program.

Program Review – Evaluator's Check Sheet continued

Program Evaluated:

Additional Comments