

Bakersfield College

Comprehensive Program Review

I. Program Information:

Program Name:

Program Type: Instructional Non-Instructional

Program Mission Statement:

Program Description: Describe how the program supports the [Bakersfield College Mission](#).

Program Learning Outcomes (PLOs)/Administrative Unit Outcomes (AUOs)—please list:

Instructional Programs only:

- A. List the degrees and Certificates of Achievement the program offers.
- B. If your program offers both an A.A. and an A.S. degree in the same subject, please explain the rationale for offering both.
- C. If your program offers a local degree in addition to the ADT degree, please explain the rationale for offering both.

II. Program Assessment:

- A. How did your outcomes assessment results during the past three years inform your program planning?
- B. How did your outcomes assessment results during the past three years inform your resource requests this year?
- C. Describe how the program monitors and evaluates its effectiveness.
- D. Describe how the program engages all unit members in the self-evaluation dialogue and process.
- E. Provide recent data on the measurement of the PLOs/AUOs, as well as a brief summary of findings.
- F. What have the program's PLOs/ AUOs revealed or confirmed in the last three years?
- G. *If applicable*, list other information, data feedback or metrics to assess the program's effectiveness (e.g., surveys, job placement, transfer rates, output measurements).
- H. Discuss the strengths of your program.
- I. Discuss areas for improvement in your program.
- J. *If applicable*, describe any unplanned events that impacted your program.

III. Resource Analysis:

- A. Human Resources
 - 1. If you are requesting any additional positions, explain briefly how the additional positions will contribute to increased student success. ([Faculty Request form](#); [Classified Request form](#))
 - 2. Professional Development ([Professional Development form](#))
 - a. Describe briefly the effectiveness of the professional development your program has been engaged with (either providing or attending) during the last cycle, focusing on how it contributed to student success.

- b. Provide rationale for future professional development opportunities and contributions that your program can make.
- B. Facilities (M&O requests can be submitted by completing the [M&O Request form.](#))
 - 1. Assess the effectiveness of the facilities used by your program in meeting [college strategic goals.](#)
 - 2. Justify your facilities and M & O request.
- C. Technology (Technology requests can be made by filling out the [ISIT Request form.](#))
 - 1. Has your program received new or repurposed technology in this 3-year cycle?
 - a. If yes, discuss the assessment of its effectiveness as it relates to student, program, or administrative outcomes.
 - b. If no, what technology could play a contributing factor in future student success and outcomes for your program? How would you evaluate the effectiveness of this technology?
 - 2. Discuss the effectiveness of technology used in your area to meet [college strategic goals.](#)
 - 3. Does your program need new or repurposed technology to support student success? Justify your ISIT Technology Request and your vision for meeting student, program, or administrative unit outcomes for this next 3-year cycle.
- D. Budget (Changes to the budget allocation can be requested using the [Budget Change Request Form.](#))
 If you are requesting any additional funding, explain briefly how it will contribute to increased student success.

IV. Trend Data Analysis:

Review the data provided by Institutional Research. Provide an analysis of program data throughout the last three years, including:

- A. Changes in student demographics (gender, age and ethnicity).
- B. Changes in enrollment (headcount, sections, course enrollment, and productivity).
- C. Success and retention for face-to-face as well as online/distance courses.
- D. Degrees and certificates awarded (three-year trend data for each degree and/or certificate awarded).
- E. Other program-specific data (please specify or attach).
- F. List degrees and certificates awarded (three-year trend data for each degree and certificate awarded). Include targets (goal numbers) for the next three years.

Degree or Certificate	2011-2012	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017

V. Progress on Previously Established Program Goals, Future Goals and Action Plans:

A. List the program’s goals from the previous Program Review. For each goal, please discuss progress and changes. If the program is addressing more than two (2) goals, please duplicate this section.

Previously Established Goal <i>(state goal)</i>	Which institutional goals from the <u>Bakersfield College Strategic Plan</u> will be advanced upon completion of this goal? (select all that apply)	Progress on goal achievement (Choose one)	Comments (if applicable)
1.	<input type="checkbox"/> 1: Student Success <input type="checkbox"/> 2: Communication <input type="checkbox"/> 3: Facilities & Infrastructure <input type="checkbox"/> 4: Oversight & Accountability <input type="checkbox"/> 5: Integration <input type="checkbox"/> 6: Professional Development	<input type="checkbox"/> Completed: _____ (Date) <input type="checkbox"/> Revised: _____ (Date) (state revised goal)	
2.	<input type="checkbox"/> 1: Student Success <input type="checkbox"/> 2: Communication <input type="checkbox"/> 3: Facilities & Infrastructure <input type="checkbox"/> 4: Oversight & Accountability <input type="checkbox"/> 5: Integration <input type="checkbox"/> 6: Professional Development	<input type="checkbox"/> Completed: _____ (Date) <input type="checkbox"/> Revised: _____ (Date) (state revised goal)	

B. List the program’s goals for the next three years. Ensure that stated goals are specific and measurable. State how each program goal supports the College’s strategic goals. Each program goal must include an action plan.

Future Goal	Action Plan	Lead person for this goal	Timeline for Completion:
1.			
Which institutional goals from the Bakersfield College Strategic Plan will be advanced upon completion of this goal? (select all that apply)			
<input type="checkbox"/> 1: Student Success <input type="checkbox"/> 2: Communication <input type="checkbox"/> 3: Facilities & Infrastructure <input type="checkbox"/> 4: Oversight & Accountability <input type="checkbox"/> 5: Integration <input type="checkbox"/> 6: Professional Development			
Future Goal	Action Plan	Lead person for this goal	Timeline for Completion:
2.			
Which institutional goals from the Bakersfield College Strategic Plan will be advanced upon completion of this goal? (select all that apply)			
<input type="checkbox"/> 1: Student Success <input type="checkbox"/> 2: Communication <input type="checkbox"/> 3: Facilities & Infrastructure <input type="checkbox"/> 4: Oversight & Accountability <input type="checkbox"/> 5: Integration <input type="checkbox"/> 6: Professional Development			

VI. Curricular Revisions (Instructional Programs only):

A. Review of Course Information:

- Column A list all of the courses associated with the degree.
- Column B list the Fall term the review process will be started for ongoing compliance.
- Column C list the compliance due date.
- Column D list any changes to courses with regard to distance education.
- Column E list corresponding C-ID descriptors if available. <http://www.c-id.net/>

****Dates listed should reflect a five year cycle allowing for one year of review to maintain ongoing compliance.****

A. Course	B. Fall Term Review will be Submitted	C. Compliance Due Date	D. Distance Education Changes	E. C-ID Descriptors Available

A. Review of Program Information:

Is the program information housed in CurricUNET accurate? (Considerations: changes in course(s) names and/or suffixes as well as additions/deletions of courses). If not, then a program modification needs to be started in CurricUNET to reflect the necessary changes. Explain the requested changes below.

Is the program and course listing information in the current catalog accurate? If not, list the requested changes below. Catalog information should reflect what is in CurricUNET.

B. Student Education Plan (SEP) Pathway(s) uploaded to “Attached Files” in CurricUNET.

If applicable, SEP Pathway with CSU Breadth indicated? Yes or No

If applicable, SEP Pathway with IGETC indicated? Yes or No

If applicable, SEP Pathway with BC General Education indicated? Yes or No

****Please ensure that the information housed in CurricUNET and the current catalog match. ****

C. If applicable, provide a description of the program’s future adoption of C-ID descriptors and Associate Degree for Transfer (ADT) or Model Curricula.

VII. Faculty and Staff Engagement:

- A. Discuss how program members have engaged in institutional efforts such as committees, presentations, and departmental activities.
- B. *Instruction Only:* Discuss how adjunct faculty are included in departmental training, discussions and decision-making.

VIII. Program Funding Sources:

Identify any non-KCCCD general fund sources

	Title of Account/Grant/Categorical Funding	Start Date	End Date	Percentage of Program Budget Covered	Positions funded wholly or in part
Foundation Accounts					
Grants					
Categorical Funding					

IX. Conclusions and Findings:

Present any conclusions and findings about the program.

VII. Attachments (place a checkmark beside the forms listed below that are attached):

- [Faculty Request Form](#)
- [Classified Request Form](#)
- [Budget Change Request Form](#)
- [Professional Development](#)
- [ISIT Form](#)
- [M & O Form](#)
- [Best Practices Form \(Required\)](#)
- Other: _____