



C U Y A M A C A  
· C O L L E G E ·

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## Executive Administrators

### Program Review Annual Update Template

### Spring 2021

**NOTE THAT ALL PROGRAM REVIEWS MUST BE SUBMITTED ONLINE VIA SURVEYMONKEY.**

**THIS FORM IS PROVIDED FOR RESPONSE DRAFTING AND PLANNING PURPOSES ONLY.**

**EMAILS WITH THE LINK TO EACH SERVICE AREA'S ONLINE MODULE WILL BE PROVIDED IN NOVEMBER 2020.**

**IF YOU HAVE QUESTIONS ABOUT THE SURVEYMONKEY PROGRAM REVIEW MODULE, PLEASE CONTACT THE INSTITUTIONAL EFFECTIVENESS, SUCCESS, AND EQUITY OFFICE AT (619) 660-4380 [brianna.hays@gcccd.edu](mailto:brianna.hays@gcccd.edu).**

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#### **I. Service Area Overview and Update**

- I.1. Service Area for Review:
- I.2. Lead Author and Collaborators:
- I.3. Manager:
- I.4. Please summarize the changes, additions, and achievements have occurred in your service area since the last program review. *You can access 2020 program reviews on the program review webpage.*

#### **II. Student Learning Outcome/Service Area Outcome Assessment and Student Success**

If your service area does not yet have data that informs your planning, please contact [Brianna.Hays@gcccd.edu](mailto:Brianna.Hays@gcccd.edu).

#### **Data to Inform Service Area Annual Planning**

- II.1. Administrative service areas collect data in many different ways. Please discuss the access, success and/or other data that your service area is using to inform its plans for the year and/or to evaluate its progress. This may include the number of students, employees, or community members served, survey results, or other reports prepared by the department and external organizations.
- II.2. How has this data impacted the goals set in your spring 2020 comprehensive program review (link)?  
  
*Please upload any supporting documentation related to this section. You can upload PDF, Word, and image files.*
- II.3. Please describe the most significant or impactful ways your service area worked across the college to advance the college's student success & equity goals and strategic priorities **over the past year?**

#### IV. **Previous Goals: Update (If Applicable)**

If you set goals in your last program review, please provide a status update, a summary of key action steps, and the results of these actions (if applicable). List previous goals as needed.

##### **Goal 1:**

1. Goal 1:
2. Link to [College Strategic Goal](#) (Which College Strategic Goal does this department goal most directly support? (**Check only one**)
  - ☐ Basic Skills Acceleration
  - ☐ Guided Student Pathways
  - ☐ Student Validation and Engagement
  - ☐ Organizational Health
3. Goal Status
  - ☐ In Progress - will carry this goal forward into next year
  - ☐ Completed
  - ☐ Not Started
  - ☐ Deleted

##### **If Deleted or Completed:**

4. Please describe the results or explain the reason for deletion/completion of the goal:

##### **If This Goal Is In Progress Or Has Not Yet Been Started:**

5. Action Steps for the Year:
6. How will this goal be evaluated?  
(Repeated as needed)

#### V. **New Goals**

If your program is proposing any new goals for this program review cycle, please state the new goal(s), summarize key action steps, and describe your plan to evaluate the outcomes/results of these actions.

##### **New Goal 1:**

1. New Goal 1:
2. Link to [College Strategic Goal](#) (Which College Strategic Goal does this department goal most directly support? (**Check only one**)
  - ☐ Basic Skills Acceleration
  - ☐ Guided Student Pathways
  - ☐ Student Validation and Engagement
  - ☐ Organizational Health
3. Please describe how this goal advances the college strategic goal identified above.
4. Please indicate how this goal was informed by SLO assessment results, PLO assessment results, student achievement data, or other data:
5. Action Steps for this Year:
6. How will this goal be evaluated?  
[Repeated as needed up to 4 goals]

## RESOURCES NEEDED TO ACHIEVE PROGRAM GOALS

### **Administrator Resource Needs**

Contact Person: Bri Hays ([brianna.hays@gcccd.edu](mailto:brianna.hays@gcccd.edu))

Link to **Administrator Position Request Form**- One form must be submitted for each request

Please submit an electronic Faculty Position Request Form for each position your department is requesting. A copy of the request form is posted to the [Program Review webpage](#) (under the Staffing Request Information menu) for planning purposes.

#### **1. Administrator Position Request 1:**

- a. Description
- b. This position is being requested to advance the following Program Goal(s):

#### **2. Administrator Position Request 2:**

- a. Description
- b. This position is being requested to advance the following Program Goal(s):

### **Classified Staff Resource Needs**

Contact Person: Bri Hays ([brianna.hays@gcccd.edu](mailto:brianna.hays@gcccd.edu))

Link to **Classified Position Request Form**- One form must be submitted for each request

Please submit an electronic Classified Position Request Form for each position your department is requesting. A copy of the request form is posted to the [Program Review webpage](#) (under the Staffing Request Information menu) for planning purposes.

#### **1. Classified Staff Position Request 1:**

- a. Description
- b. This position is being requested to advance the following Program Goal(s):

#### **2. Classified Staff Position Request 2:**

- a. Description
- b. This position is being requested to advance the following Program Goal(s):

### **Technology Resource Needs**

Contact Person: Kerry Kilber Rebman ([kerry.kilberrebman@gcccd.edu](mailto:kerry.kilberrebman@gcccd.edu))

Link to **Technology Request Form**- One form must be submitted for each request

### **Supplies, Equipment & Other Resource Needs**

Contact Person: Kerry Kilber Rebman ([kerry.kilberrebman@gcccd.edu](mailto:kerry.kilberrebman@gcccd.edu))

Link to **Supplies, Equipment & Other Resources Request Form**-One form must be submitted for each request

### **Facilities Resource Needs**

Contact Person: Francisco Gonzales ([francisco.gonzalez@gcccd.edu](mailto:francisco.gonzalez@gcccd.edu))

Link to **Facilities Request Form**- One form must be submitted for each request

**Have you completed all of the other sections of this program review?**

☐ Yes ☐ No