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**Stand-Alone Short-Term Credential**

*{Insert Name of Academic Program}*

Report prepared by – XXX

XXX, XXX Division Dean

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# Signatures Page

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Department Chair or Program Coordinator Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Dean Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vice-President of Learning and Student Success Date

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Director of Institutional Effectiveness Date

# Checklist for Completion

1. Initial Meeting with Office of Institutional Effectiveness (OIE) \_\_\_
2. Initial Meeting with Academic Dean \_\_\_
3. Mid-process Meeting with Academic Dean \_\_\_
4. Draft Review Meeting with Academic Dean \_\_\_
5. Submission to OIE \_\_\_
6. Presentation before Curriculum and Instruction (C&I) Meeting \_\_\_
7. Obtained Signatures \_\_\_
8. Final Report Accepted by OIE \_\_\_

# Executive Summary

*{Complete this section last. Please summarize the talking points of the program review process to help guide the presentation before C&I Committee. There should be a brief paragraph with the main points and/or conclusions for each part of the program review.}*

# Part I – Program Overview

1. What is the Program Purpose or Mission Statement?
2. How does the program fulfill the Mission and Strategic Goals of the College?
3. Does the program have smaller stackable Career Studies Certificate embedded in the program? If yes, what is it?

Yes

No

1. Please complete the table below on *Careers, Education Required, and Salaries*, encompassing occupations related to this program of study. Some possible data sources to help you complete the table include –
   1. Virginia Career Works (<https://www.vawc.virginia.gov/vosnet/Default.aspx>),
   2. Under the Tyler Majors pages, for GE programs, see Wage & Employment Trends, Graduates who got jobs (*Details* tab)
   3. Virginia Labor Market Information (LMI) (<https://virginiawlmi.com/>)
   4. Bureau of Labor Statistics Wage Data by Area and Occupation (<https://www.bls.gov/bls/blswage.htm>)

## Table 1. Careers, Education Required, and Salaries

|  |  |  |  |
| --- | --- | --- | --- |
| **Career/Job** | **Certificate or Degree?** | **Additional Certifications Needed?** | **Average Salary** |
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1. Please complete the table below on *Career Projections*, encompassing occupations related to this program of study. Some possible data sources to help you complete the table include –
   1. Virginia Career Works (<https://www.vawc.virginia.gov/vosnet/Default.aspx>);
   2. Under the Tyler Majors pages, see Careers and Salaries in the top right-hand corner;
   3. Virginia Labor Market Information (LMI) (<https://virginiawlmi.com/>); and/or
   4. Bureau of Labor Statistics Wage Data by Area and Occupation (<https://www.bls.gov/bls/blswage.htm>).

## Table 2. Career Projections

|  |  |  |
| --- | --- | --- |
| **Career/Job** | **Current Employment Numbers** | **Projected Growth or Decline?** |
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1. Are there any external accreditation requirements, specific to this program and/or its stackable credentials or specializations? If so, please include data regarding testing rates, accreditation status, etc., in the text box below. *A cut/paste of the information posted on the public-facing web page for the program should suffice. You may also choose to provide accreditation status letters and/or links to websites with that information.*

Yes

No

1. Are there any program milestones since the last program review cycle? Examples of milestones would include new or expanded external accreditation, moving to a different site, grants awarded, and/or expanding access to dual enrollment students or by a different type of course delivery.

Yes

No

# Part II – Faculty

1. Please list (or attach) all full-time (FT) and part-time (PT) teaching and administrative faculty for your program, including their credentials. Please also include dual enrollment (DE) and/or off-site faculty who teach for your program in the table below. If there is any significant professional development (PD) faculty have completed that positively impact the program and/or their support their credentialing, please include this too. *The information requested in the table below is an internal review of faculty credentialing for regional accreditation purposes.*

## Table 3. Faculty Credentials Roster

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Faculty** | **Title/Position** | **FT or PT** | **Dual Enrollment (DE) or Off-site Faculty?** | **Credentials** | **Alternative Credentials and/or PD** |
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1. Based on the faculty roster, do all faculty have the skills and/or credentials needed to support the program area? If not, what skills, credentials, and/or training is/are needed to bring the program into SACSCOC, external accreditor, and/or Federal compliance?

Yes

No

1. Are the number of faculty and program coordination adequate to support the program?

*To our regional accrediting body, Southern Association of Colleges and Schools Commission on Colleges (SACSCOC), the term “adequate” describes whether the college employs a sufficient number of full-time faculty to ensure curriculum and program quality, integrity, and review; and whether the institution assigns appropriate responsibility for program coordination.*

If not, please explain what is needed to bring the program into SACSCOC, external accreditor, and/or Federal compliance.

Yes

No

1. Please list any outreach/college/instructional activities (e.g., club sponsorships, committees, advisory boards, organizations, etc.) in which your faculty or staff participate, in support of the program and/or College activities.

III – Students

# Part III – Students

1. What is the annual program-related enrollment for the program since the last review cycle? Please refer to Table 1 from the program profiles data provided to you. Please summarize the enrollment trends since the last review cycle in the text box below, using the data provided.
2. What is the annual full-time equivalent student (FTES) data since the last review cycle? Please refer to Table 2 from the program profiles. Please summarize the FTES trends since the last review cycle in the text box below, using the data provided.
3. What are the trends in enrollment by part-time and full-time students, gender, ethnicity and campus? Please review Tables 3-6 from the program profiles for demographic data. Please summarize the trends, using the data provided.
4. Do your students need to apply to your program? If yes, please copy/paste the entrance requirements in the text box below, and/or attach the application requirements to this review. *Any programs that have application requirements typically do not have first-time-in-college (FTIC) data.*

Yes

No

1. If the answer is ‘no’ above, what are the trends in first-time-in-college (FTIC) program-placed students (e.g., disaggregated demographics, cohort retention, graduation and/or transfer)? Please review Tables 15-19 in the program profiles data. If your program requires an application process in which students must complete pre-requisites before being admitted into the program, please disregard the discussion prompt below.

The program enrolls FTIC students.

The program does not enroll FTIC students due to the program application process.

1. What are the graduate data trends? Please refer to Tables 9-12 in the program profiles data. Please summarize the trends, using the data provided.
2. Using Table 21 in the program profiles data, please summarize trends on student success rates. Are students more or less likely to be successful in certain disciplines/course-levels? Where could students potentially become bottlenecked or blocked, in terms of program progression? How could this be addressed?

Using the faculty roster in Part II, please calculate the number of faculty for the last academic year.

## Table 4. Faculty-Related Indicators

|  |  |
| --- | --- |
| **Faculty-Related Indicators** | **Current AY** |
| Total # Faculty |  |
| FT Faculty |  |
| PT Faculty |  |
| DE/Off-site Faculty |  |
| Ratio of FT / PT and DE or Off-site Faculty |  |

1. If you run majors-related courses in the summer that cannot successfully run during a fall-spring academic year (AY) sequence, please explain the rationale for doing so.

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. Have you developed advising guidance for students completing the program as a full-time and/or part-time student? If you have, please cut/paste the advising guidance in the text box below.

Yes

No

1. What are the trends you found from the student success indicators in the *Tables 4 and 5* above? Are there any areas you found where you can seek continuous improvement for your program?

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. Based on the summary above, what, if any, recommendations would you suggest to address continuous improvement in student-related outcomes?

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

# Part IV – Employers

1. Using Table 13 and/or data you have collected, what are the top five employers hiring graduates from your program? If your results differ from Table 13, please provide the number of graduates hired by these employers.

1.

2.

3.

4.

5.

1. Are the top five employers participating on your program advisory committee?

Yes

No

1. Do you need administrative support in approaching these employers to include on your advisory committee?

Yes

No

1. What is the membership of your advisory committee? Please list all members, their affiliation, and if they are attached to local industry, K-12, government, accrediting agency, or postsecondary sectors.

## Table 5. Advisory Committee Membership and Affiliation

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Company/Organization** | **Sector** | **Years of Committee Service** |
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1. Has your advisory committee generally met once/semester since the last review cycle?

Yes

No

1. If requested, are you able to provide meeting minutes for the program advisory committee since the last review cycle?

Yes

No

1. Does your program have dual enrollment or off-site sections? If so, please indicate from which counties and/or cities K-12 faculty or administrators and/or organizations participate on your advisory committee.

Yes

No

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. Do you have any advisory committee representatives not captured above? How do these committee members help drive curricular changes and/or provide support for the program?

Yes

No

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. Do local employers support the program beyond advisory committee participation? If so, please summarize evidence that local employers have supported the program via recruiting events, donations, grants, etc.

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

# Part V – Assessment and Continuous Improvement

1. Please list the Program-Level Student Learning Outcomes, as captured in the annual academic assessment reports and in the Academic Catalog.

P-SLO 1 –

P-SLO 2 –

P-SLO 3 –

1. Using the annual academic reports since the previous cycle, please summarize the results of program-level assessment over time. What changes have been made? What trends in student learning have you documented? How have you measured continuous improvement in your program?
2. Are there any changes to the P-SLOs and/or academic assessments that you would recommend for the next review cycle?

Yes

No

1. Are there any short-term credentials or specializations that you would like to add in the next five years, related to the parent program? If so, please explain the market need for the additional credential(s) below.

Yes

No

# Part VI – Facilities and Physical Resources

1. SACSCOC requires that facilities and physical resources are adequate to support your program.

*The measure of the term, adequate, refers to whether the institution ensured the needs of educational programs, support services, and mission-related activities, in respect to facilities and physical resources (e.g., laboratory instruments, classroom or laboratory space, lighting, computers, etc.) at both on-campus and off-campus sites. Facilities and physical resources do not need to be identical to be adequate, but must be similar enough to be effective, meet the needs of students and programs, support mission-related activities, and be available to students (i.e., academic and student support services).* *If facilities and physical resources are inadequate, then program and student needs are not met.*

Are the following facilities and physical resources in compliance with SACSCOC requirements?

## Table 6. Facilities and Physical Resources

|  |  |  |  |
| --- | --- | --- | --- |
| **Facilities or**  **Physical Resources** | **Yes** | **No** | **Don’t Know or Not Applicable** |
| Classrooms |  |  |  |
| Offices |  |  |  |
| Laboratories |  |  |  |
| Computers |  |  |  |
| Major-specific Instruments or Equipment |  |  |  |
| General utilities (heating, electrical, plumbing, AC, etc.) |  |  |  |
| Safety |  |  |  |
| Security |  |  |  |
| Accommodations for students with disabilities |  |  |  |
| Testing Center and/or testing services |  |  |  |
| Access to other Academic Support and Student Support Services |  |  |  |
| Storage |  |  |  |
| Other: |  |  |  |

1. Are there additional facilities and/or physical resources that you believe would benefit students in the program? What are they, and what impact do you anticipate they will have on student success?

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

# Part VII – Recommendations

1. What changes do you recommend to demonstrate continuous improvement in the parent program in the future? Please provide a timeline with milestones.

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. What changes do you recommend to demonstrate continuous improvement of program-related specialization in the future? Please provide a timeline with milestones. If there are no specializations for this program, please select the Not Applicable box below.

Not Applicable

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. What changes do you recommend to demonstrate continuous improvement of program-related short-term credentials in the future? Please provide a timeline with milestones. If there are no specializations for this program, please select the Not Applicable box below.

Not Applicable

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. Based on the evidence captured in this report, what additional recommendations do you have for the continuous improvement of this program over the next cycle?

[Grab your reader’s attention with a great quote from the document or use this space to emphasize a key point. To place this text box anywhere on the page, just drag it.]

1. Please attach the program profiles data and any other supplementary data used to complete this review to the document. This can be included (cut/paste) in the Appendix section.

# Appendix