

Student Life and Learning ASSESSMENT PLAN AND REPORT

Instructions:

1. This document should be completed and turned into the Dean of Students Office no later than 3 months before the assessment date is to occur.
2. The Dean or Associate Dean will review the procedures, measurement tools, and make suggestions.
3. If a measurement tool is to be created in-house, the interested parties will meet to review objectives and potential assessment formats.
4. Once approved, the form will be returned to the director/staff member.
5. Once completion of the assessment has occurred and reports created and disseminated, this document along with a copy of all reports generated from the data should be turned into the Student Life and Learning Office.

Initial Submission Date:

Signature and Date of Approval:

Final Submission Date:

PROGRAM TITLE:	<input type="text"/>
SEMESTER & YEAR:	<input type="text"/>
CONTACT PERSON/POSITION:	<input type="text"/>
STUDENT L&L DEPARTMENT:	<input type="text"/>

PROGRAM DESCRIPTION *(Use the space provided to summarize the program you plan to assess):*

TARGET POPULATION *(Use the space provided to describe the population you hope to assess as well as the response rate you hope to attain. (e.g. 100%, 80%, 50%, etc...)).*

PROGRAM OUTCOMES *(What do you hope to accomplish? What do you want students to learn?):*

The student will:

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STUDENT LIFE & LEARNING GOALS & OBJECTIVES *(Which goal/objective will this event address?):*

- Goal 1: Advance Student Learning**
 - Connect Curricular and Co-Curricular
 - Advance Attainment of General Education Competencies
 - Link Social and Intellectual Learning
- Goal 2: Promote Student Engagement**
 - Stimulate Student Initiated Programming
 - Promote Identity and Relationship Building
 - Provide Leadership Development
 - Coordinate Holistic Initiatives
- Goal 3: Enhance Positive Community & Climate**
 - Promote Cultural Diversity & Understanding
 - Foster Active Citizenship and Personal Integrity
 - Provide a Safe and Accessible Environment
 - Provide Student Centered Services

MEASUREMENT PROCEDURES

NAME OF MEASUREMENT TOOL	
FORMAT OF TOOL	<input type="checkbox"/> Survey <input type="checkbox"/> One-on-One interview <input type="checkbox"/> Focus Group <input type="checkbox"/> Multiple Choice Test <input type="checkbox"/> Other (Describe):
AUTHOR OF TOOL	<input type="checkbox"/> Developed in-house <input type="checkbox"/> Commercial Measurement Tool <input type="checkbox"/> Adapted from other university <input type="checkbox"/> Other (Describe):
HOW AND WHEN WILL THIS ASSESSMENT BE ADMINISTERED?	<input type="checkbox"/> Online <input type="checkbox"/> Recorded on Cassette; Transcribed with Paper and Pencil <input type="checkbox"/> Other (Describe): <input type="checkbox"/> Pre-test/Post-test format <input type="checkbox"/> At the end of the activity <input type="checkbox"/> Email <input type="checkbox"/> Internet service <input type="checkbox"/> Other (Describe):

WHO WILL SCORE THE INSTRUMENT, DEVELOP THE REPORT, AND DETERMINE OUTCOMES OF ASSESSMENT?	
HOW WILL THE DATA BE REPORTED?	
WHO WILL RECEIVE REPORTING?	
HOW WILL THIS DATA BE USED TO MAKE DECISIONS FOR THE FUTURE?	

This section is to be completed after assessment and reporting have occurred.

ACTION TO BE TAKEN *(What information did you learn? How will the results effect future programming? Was the assessment helpful? Are there any changes that need to be made in future assessment? Were there any limitations to your assessment that you have to fix next time?)*