



## Welcome to Program Review

Merritt College - 2019

BUS - Instruction

Program Review

### Program Overview

**Please verify the mission statement for your program. If your program has not created a mission statement, provide details on how your program supports and contributes to the College mission.**

**Program Total Faculty and/or Staff**

**Full Time**

**Part Time**

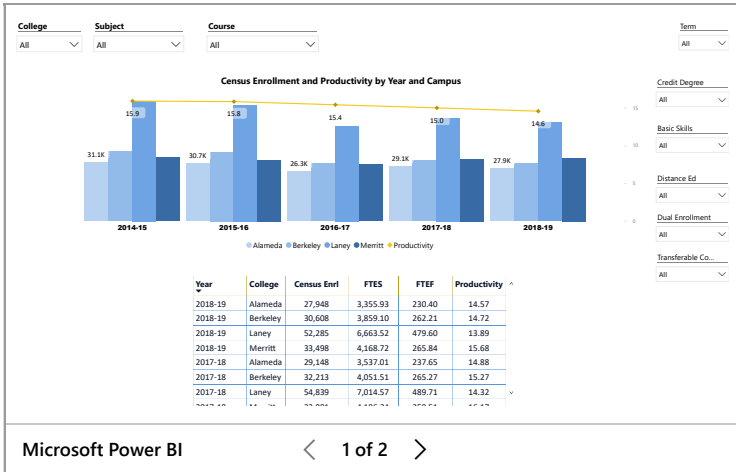
**The Program Goals below are from your most recent Program Review or APU. If none are listed, please add your most recent program goals. Then, indicate the status of this goal, and which College and District goal your program goal aligns to. If your goal has been completed, please answer the follow up question regarding how you measured the achievement of this goal.**

**Describe your current utilization of facilities, including labs and other space**

### Enrollment Trends

College Level - Program and Department comparison

Chart



Compare



Using the Enrollment Trends dashboard filter to your college and subject area. Reflect on the enrollment trends over the past three years. How does the enrollment trend for your program compare to the overall college trend? What factors could be attributing to this trend?

Describe effective and innovative teaching strategies used by faculty to increase student learning and engagement.

**How is technology used by the discipline, department?**

**How does the discipline, department, or program maintain the integrity and consistency of academic standards with all methods of delivery, including face to face, hybrid, and Distance Education courses?**

**In the boxes below, please add improvement actions and resource requests that are directly related to the questions answered in this section. If there are no improvement actions or resource requested in this area, leave blank.**

Improvement Action

Improvement Actions

**Improvement Action**

Action Item	Description	To be completed By	Responsible Person
		10/10/2019	

**Resource Request**

Choose an Option

**Curriculum**

**Please review your course outlines of record to determine if they have been updated or deactivated in the past three years. Use the pull-down menus to identify courses that still need updating or deactivation and specify when your department will update each one, within the next three years.**

Name	Last updated date	Semester and Year	To be updated on	To be deactivated on
		Select Year...		

**Please summarize your plans for curriculum improvement/development, including details on specific courses or programs you plan to improve/develop.**

**In the boxes below, please add improvement actions and resource requests that are directly related to the questions answered in this section. If there are no improvement actions or resource requested in this area, leave blank.**

Choose your Action

Improvement Actions

## Sign and Submit

**Please provide the list of members who participated in completing this program review.**

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**Please enter the name of the person submitting this program review.**

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