**Student Success Department/Program Assessment Report**

***for Student Learning Outcomes***

**Department or Program: Director & Preparer: Semester/Year: Spring 2017**

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| **Close the Loop**Please list any changes that you have made since last assessment/survey.(If this is your first assessment of Student Learning Outcomes in Your Program, Leave Blank.) | **1.****Student Learning Outcomes**List what students are expected to know or to demonstrate in your program | **2.****Survey Questions Aligned to SLO’s**If You Are Using a Survey, Questions Must Reflect Student Learning Outcomes | **3.****Survey Pool Size**  | **4.****Results**Numbers &Percentage | **5.****Action Plan** Based on Survey ResultsWhat Actions You Will TakeTo Improve Student Learning |
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Please forward to Loida.Cedeno@bcc.cuny.edu Questions, comments, assistance: Richard.LaManna@bcc.cuny.edu

Due dates for reports: December 15th for Fall semester; June 15th for Spring semester. Please contact us with any questions, concerns, or change in reporting plans or dates.

 Revised: 6/8/2017