

# ACADEMIC PROGRAM REVIEW TEAM ASSESSMENT

(PLEASE COMPLETE ONE SHEET FOR EACH PROGRAM)

Department \_\_\_\_\_

Program \_\_\_\_\_

College \_\_\_\_\_

**PROGRAM RATING**

**CATEGORY**

**PRIORITY**

Dean of College

\_\_\_\_\_

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APR Team Rating

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## Comments

Highlights from discussion about the program by the APR team

## Recommendations

Highlights from Strategic Plan and discussions by APR team