**2020 Format for Reports on Periodic Review of Academic Programs**

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| **SECTION I: PROGRAM AND INSTITUTION DEMOGRAPHICS**1. **Institution**:
2. **HEGIS Code:**
3. **CIP Code:**
4. **Degree / Certificate Level – Select all that apply and indicate the name of the degree / certificate:**

**[ ]  Bachelor’s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(BA, BS, etc.)****[ ]  Master’s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(MA, MS, MBA, MEd, MPH, MSN, etc.)****[ ]  Combined Master’s/Doctorate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(MS/Ph.D., MEd/Ed.D., MSN/DNP, etc.)****[ ]  Doctorate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(Ph.D., Ed.D., DNP, PharmD., etc.)****[ ]  Certificate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **(LDC, UDC, PBC, PMC, CAS, etc.)**1. **Title of the Program reviewed**:
2. **Academic Department:**
3. **Academic College / School:**
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| **SECTION II: EXTERNAL REVIEW PROCESS**1. **Year in which the program review process was completed:**
2. **Is the external review a result of an Accreditation Self-Study (i.e. ABET, AACSB, ACPE, ACEJMC, ARC-PA, ACEN, CCNE, CEPH, CSWE, NCATE, etc.)? \_\_\_\_\_\_Yes \_\_\_\_\_\_No**

**If Yes, indicate the accrediting organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**1. **List the Name(s) and Affiliation(s) of the External Reviewer(s):**
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| **SECTION III: ENROLLMENTS AND DEGREES AWARDED FOR EACH OF THE PAST FIVE YEARS IN THIS PROGRAM**1. **Enrollment – Fall Headcount For Each Of The Following Years**

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| **Undergraduate Enrollment** **(Bachelor’s)** |
| **Fall 2015** | **Fall 2016** | **Fall 2017** | **Fall 2018** | **Fall 2019** |
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| **Graduate Enrollment****(Master’s)**  |
| **Fall 2015** | **Fall 2016** | **Fall 2017** | **Fall 2018** | **Fall 2019** |
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| **Graduate Enrollment** **(Combined Master’s/Doctorate)** |
| **Fall 2015** | **Fall 2016** | **Fall 2017** | **Fall 2018** | **Fall 2019** |
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| **Graduate Enrollment** **(Doctorate)** |
| **Fall 2015** | **Fall 2016** | **Fall 2017** | **Fall 2018** | **Fall 2019** |
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| **Certificate Enrollment**  |
| **Fall 2015** | **Fall 2016** | **Fall 2017** | **Fall 2018** | **Fall 2019** |
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1. **Degrees Awarded - For The Fiscal Years As Follows:**

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| **Undergraduate Degrees Awarded** **(Bachelor’s)** |
| **FY 2015** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
|  |  |  |  |  |

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| --- |
| **Graduate Degrees Awarded****(Master’s)** |
| **FY 2015** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
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| **Graduate Degrees Awarded****(Combined Master’s/Doctorate)** |
| **FY 2015** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
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| **Graduate Degrees Awarded****(Doctorate)** |
| **FY 2015** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
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| **Certificates Awarded** |
| **FY 2015** | **FY 2016** | **FY 2017** | **FY 2018** | **FY 2019** |
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**SECTION IV: SUMMARY OF THE INTERNAL AND EXTERNAL REVIEW**1. **Brief summary of internal self-study review findings.**
2. **Brief summary of external review recommendation(s) for action. If a regional or programmatic accrediting organization provided the external review, please indicate the organization and the context in which the review occurred.**
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| **SECTION V: DEPARTMENTAL / COLLEGE OR SCHOOL / INSTITUTIONAL ACTION PLAN** 1. **Brief summary outlining action plan to address recommendation(s):**
2. **Mechanism for follow-up and assessing the progress of the recommendation(s).**
3. **Low enrollment and low degree productivity programs: \***

**a) List the special circumstances that impact low enrollment and/or low degree productivity in this program;****b) Briefly explain why this program with low enrollment and/or low degree productivity should be continued at this time (i.e. its connection to or support of another program); and** **c) Outline clearly the plan and progressive timelines to increase enrollment and/or degree productivity in this program such that it remains viable.** **\* For this review period please complete the information as indicated if the program has low enrollment and/or is demonstrating low degree productivity in accordance to the MHEC Definition ofLow Degree Productivity.**   **MHEC Definition ofLow Degree Productivity:** **Bachelor’s: < 5 in most recent year or a total of 15 in last three years** **Master’s: < 2 in most recent year or a total of 6 in last three years** **Doctorate: < 1 in most recent year or a total of 3 in last three years** |
| **SECTION VI: INSTITUTION SUBMISSION INFORMATION****Submitted by:****Date of Submission:****Contact Information:**1. **Name:**
2. **Email:**
3. **Office Phone:**
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