SECTION 1: REPORT COMPLETION STATUS

**PROMPT: Report Completion Status**

**RESPONSE TYPE: (Dropdown Menu)**

**OPTIONS:**

Keep all original options.

**PROMPT: Date of Status Update**

**RESPONSE TYPE: (Date, XX/XX/XXXX)**

**PROMPT: Comments Relating to Report Status or Completion**

**HELP TEXT:**  If you have any comments or notes you would like to input here in relation to the status of your report or its completion, you can use this field to describe your status. Otherwise, please type NA if you have no additional comments or notes to input.

**RESPONSE:**

SECTION 2: OVERVIEW

**PROMPT:** **The Campus is now in its 2nd year of the program review cycle (the Annual Program Update (APU) Year).** During the Comprehensive year (Year 1) you developed at least two program goals with the aim of achieving over the next four years and created a plan to help implement and reach these goals. Please provide any relevant updates regarding your set plans.

**HELP TEXT: Look at your Program Goals, SWOC analysis and plans you made during Year 1 to implement and reach the set goals and provide an update on what you have done to move forwards with meeting these goals over this past year. This is just a progress update, the plan you created was supposed to help you achieve these goals over this four-year program review cycle.**

**RESPONSE:**

SECTION 3: COMPLIANCE

**PROMPT:** **SAO Assessment:** Summarize how the department has utilized service area outcomes to enhance its services during Year 1 of the current Program Review Cyle.

**HELP TEXT: See** SAO assessment data in the right slider in Nuventive.

**RESPONSE:**

**PROMPT:** How does your department implement the five VVC Caring Campus Behavioral Commitments in practice?

**HELP TEXT:** These are the VVC Caring Campus Behavioral Commitments

1. **Ten Foot Rule:** Whenever a student is within 10’ and seems to need assistance, take the initiative to approach them. Say hello, smile, and use a positive tone.
2. **Name tags:** Wear name badges or lanyards with the college name on them so that students will know who to approach with questions.
3. **Cross-Department Awareness:** Learn about other departments so you know where to send students.
4. **Warm Referrals:** Call ahead or walk student(s) to the office they need to get to. Follow up to ensure the student got there.
5. **First Week Greetings:** During the first week of classes, set up information tables and meet students in the parking lot, welcoming students to the college.

**RESPONSE:**

**PROMPT:** Considering your adopted EMP goals, and your set improvement plans you identified to significantly advance at least one of the three EMP initiatives. Please provide any relevant updates regarding your set plans.

**HELP TEXT:** The three EMP major initiatives are Caring Campus, Pathways Completion, Pursuit of Excellence. Detailed descriptions can be found in EMP 2020. Your set plans are detailed in your Comprehensive narrative report for Year 1 of the Program Review Cycle.

**RESPONSE:**

**PROMPT:** What professional development topics, activities or training would you like your department to pursue during the 2025-2026 period to maintain and enhance its pursuit of excellence?

**HELP TEXT:** Please consider your SAO assessment results as you evaluate your need for professional development. What opportunities for improvement exist that can be addressed with training and development?

**RESPONSE:** Multi Select Dropdown

Customer Service, Caring Campus, Technology Use, System Automation, Data Literacy, ADA compliance, Website content development

SECTION 4: RESOURCE MANAGEMENT & CONTINUOUS IMPROVEMENT

**PROMPT:** Has your program received augmentation funds during this current Program Review Cycle?

**HELP TEXT:** Augmentation funds are funds which have been requested by your program/unit through the process of program review. Usually, these are requested through the Resource Request function in Nuventive. If you are uncertain if your program received augmentation funds since Fall 2024, please look at your past resource request to see the noted resource request with "Augmented".

**RESPONSE:** (Dropdown Menu)

OPTIONS: Yes or no

**PROMPT**: If you answered Yes to the previous question, describe the status of any augmentation funds your program received, and whether these funds have been used. If the funds have been used, please evaluate how these funds promoted student success and/or the advancement of your program.

**HELP TEXT:** If you are uncertain if your program received augmentation funds since Fall 2024, please look at your past resource request to see the noted resource request with "Augmented". If this does not apply to you, place an N/A in the text box.

**RESPONSE:**

**PROMPT:** Has your program received additional staff funding during this current Program Review Cycle?

**HELP TEXT:** Staff funds are funds which have been requested by your program/unit through the process of program review. Usually, these are requested through the Resource Request Ongoing Funds Request function in Nuventive. If you are uncertain if your program received staff/faculty funds since Fall 2024, please look at your past resource request to see the noted resource request with "Augmented".

**RESPONSE:** (Dropdown Menu)

OPTIONS: Yes or no

**PROMPT:** If you answered Yes to the previous question, describe the status of any staff augmentations your program received, and whether these funds have been used. If the funds have been used, please evaluate how these funds promoted student success and/or the advancement of your program. This includes funds your program has been approved for but has not yet received. If this is the case, please include if there is an expected timeline for receiving the funds.

**HELP TEXT:** If you are uncertain if your program has received augmentation funds since Fall 2024, please look at your past resource request under Request Ongoing Funds to see the noted resource request with "Augmented". If this does not apply to you, place an N/A in the text box.

**RESPONSE:**

SECTION 5: REFLECTION & EXTENUATING CIRCUMSTANCES

**PROMPT:** Please describe any extenuating circumstances or program needs not addressed above that require the institution’s consideration.

**HELP TEXT:** Were there circumstances this year that affected your program that you want to mention in this report? Here is your opportunity to raise anything not previously addressed in this report. If this does not apply to you, place an N/A in the text box.

**RESPONSE:**