



2016-2017 Instructional Program Review Annual Update

1. Discipline/Area Name: Music	For: 2016-2017
2. Name of person leading this review: David Newby	
3. Names of all participants in this review: Elizabeth Fewtrell, John McQuilkin, Peggy Martindale	
4. Status Quo option: Year 1: Comprehensive review <input type="checkbox"/> Year 2: Annual update or status quo option <input checked="" type="checkbox"/> Year 3: Annual update <input type="checkbox"/> Year 4: Annual update or status quo option <input type="checkbox"/>	In years two and four of the review cycle, programs may determine that the program review conducted in the previous year will guide program and district planning for another year. <input checked="" type="checkbox"/> Check here to indicate that the program review report written last year accurately reflects program planning for the current academic year. (Only programs with no updates or changes may exercise the status quo option. All others will respond to questions 6 – 13.)

Number of Full-time Faculty

Number of Part-time Faculty

Data/Outcome Analysis and Use

5. Please review the [subject level data](#) and comment on trends (more data will be available the Program Review [web page](#)):

Indicator	2012-2013	2013-2014	2014-2015	2015-2016	Recent trends?	Comment
Enrollment #					Choose an item.	
# of Sections offered					Choose an item.	
# of Online Sections offered					Choose an item.	
# of Face-to-Face Sections offered					Choose an item.	
# of Sections offered in Lancaster					Choose an item.	
# of Sections in other locations					Choose an item.	
# of Certificates awarded					Choose an item.	
# of Degrees awarded					Choose an item.	
Subject Success Rates					Choose an item.	
Subject Retention Rates					Choose an item.	
Full-time Load (Full-Time FTEF)					Choose an item.	
Part-time Load (Part-time FTEF)					Choose an item.	
PT/FT FTEF Ratio					Choose an item.	

#	Indicator	Comments and Trend Analysis
7.	If applicable, report program/area data showing the quantity of services provided over the past four years (e.g. # of workshops or events offered, ed.plans developed, students served)	
8.	Student success and retention rates by equity groups within discipline	Review and interpret the subject data by race/ethnicity and gender. Identify achievement gaps. List actions that are planned to meet the Institutional Standard of 69.1% for student success and to close achievement gaps:
9.	Career Technical Education (CTE) programs: Review the labor market data on the California Employment Development Department website for jobs related to your discipline.	Comment on the <u>occupational projections</u> for employment in your <u>discipline</u> for the next two years and how the projections affect your planning:

10. Cite examples of using action plans (for SLOs, PLOs, OOs, ILOs) as the basis for resource requests and how the allocation of those resources or other changes resulted in improved outcomes over the past four years.

SLO/PLO/OO/ILO	Action Plan	Current Status	Impact of Action
		Choose an item.	
		Choose an item.	
		Choose an item.	
		Choose an item.	

11. Review the goals identified in your most recent comprehensive self-study report and any subsequent annual reports. Briefly discuss your progress in achieving those goals.

Goals/Objectives	Current Status	Impact of Action (describe any relevant measures/data used to evaluate the impact)
	Choose an item.	
	Choose an item.	
	Choose an item.	

Briefly discuss your progress in achieving those goals:

Please describe how resources provided in support of previous program review contributed to program improvements:

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12. Based on data analysis, outcomes, program indicators, assessment and summaries, list discipline/area goals and objectives to advancing district Strategic Goals, improving outcome findings and/or increasing the completion rate of courses, certificates, degrees and transfer requirements in 2018-2019. Discipline/area goals must be guided by **district Strategic Goals** in the Educational Master Plan (EMP), p.90. They **must be supported by an outcome or other reason (e.g., health and safety, data analysis, national or professional standards, a requirement or guideline from legislation or an outside agency).**

Goal #	Discipline/area goal and objectives	Relationship to Strategic Goals* in Educational Master Plan (EMP) and/or Outcomes	Action plan(s) or steps needed to achieve the goal**	Resources needed (Y/N)?
		Choose an item. Choose an item. Choose an item. Choose an item.		Choose an item.
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		Choose an item. Choose an item. Choose an item. Choose an item.		Choose an item.

****Action plan verbs: *expand, reduce, maintain, eliminate, outsource, reorganize, re-engineer, study further, etc.***

13. Identify significant resource needs that should be addressed currently or in near term. For each request type identify which **discipline/program goal(s) from #12 guide this need.**

Indicate which Goal(s) guide this need	Type of Request (Personnel ¹ , Technology ² , Physical ³ , Professional development ⁴ , Other ⁵)	New or Repeat Request?	Briefly describe your request here	Amount, \$	One-time or Recurring Cost, \$?	Contact's name
	Choose an item.	Choose an item.			Choose an item.	
	Choose an item.	Choose an item.			Choose an item.	
	Choose an item.	Choose an item.			Choose an item.	
	Choose an item.	Choose an item.			Choose an item.	
	Choose an item.	Choose an item.			Choose an item.	
	Choose an item.	Choose an item.			Choose an item.	
	Choose an item.	Choose an item.			Choose an item.	

¹List needed human resources in priority order. For faculty and staffing request attach Faculty Position Request form.

²List needed technology resources in priority order.

³In priority order, list facilities/physical resources (remodels, renovations, or new) needed for safer and appropriate student learning and/or work environment.

⁴List needed professional development resources in priority order. This request will be reviewed by the professional development committee.

⁵List any other needed resources in priority order.