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# Academic & Student Support Services Assessment Report

**1. Department and Division:**

*Department* – *Division*

**2. Assessment Year**

Academic Year *Assessment can occur at any time during the stated academic year*

*For reference:*

*Austin College Mission*

<https://www.austincollege.edu/about/fast-facts/mission/>

*Austin College Educational Mission:*

<https://bulletin.austincollege.edu/academic-program/>

4. Expected Student Outcome #1 (required): *What impact do you want to have on students with your department’s actions? “Students will…as a result of…”*

**4(b). How the Expected Student Outcome Supports the Austin College Mission or Educational Mission (see links above):**

**5. Measures and Data Sources:** *How will you measure if you have met the objective? At least two methods of measurement should be used. Quantitative and qualitative measures can be included to share a full picture of what may be happening as a result of your department’s actions.*

1.

2.

**6. Target(s) for Success:** *What level do you want to meet in your measurement that would indicate “success?”*

**7. Results of the Assessment:**

**7(a) Did you meet your target(s) for success?**

○ Yes

○ No

○ Partially

If Partially, please explain briefly:

Expected Student Outcome #1 continued

**7(b) Explanation of Results** *What is the summary of the data you collected?*

**8. Closing the Loop: Changes to Consider for the Future** *What changes do you plan to make as a result of this data? When do you plan on making these changes?*

4. Expected Student Outcome #2 (required): *What impact do you want to have on students with your department’s actions? “Students will…as a result of…”*

**4(b). How the Expected Student Outcome Supports the Austin College Mission or Educational Mission (see links above):**

**5. Measures and Data Sources:** *How will you measure if you have met the objective? At least two methods of measurement should be used. Quantitative and qualitative measures can be included to share a full picture of what may be happening as a result of your department’s actions.*

1.

2.

**6. Target(s) for Success:** *What level do you want to meet in your measurement that would indicate “success?”*

**7. Results of the Assessment:**

**7(a) Did you meet your target(s) for success?**

○ Yes

○ No

○ Partially

If Partially, please explain briefly:

Expected Student Outcome #2 continued

**7(b) Explanation of Results** *What is the summary of the data you collected?*

**8.** **Closing the Loop: Changes to Consider for the Future** *What changes do you plan to make as a result of this data? When do you plan on making these changes?*

4. Expected Student Outcome #3 (optional): *What impact do you want to have on students with your department’s actions? “Students will…as a result of…”*

**4(b). How the Expected Student Outcome Supports the Austin College Mission or Educational Mission (see links above):**

**5. Measures and Data Sources:** *How will you measure if you have met the objective? At least two methods of measurement should be used. Quantitative and qualitative measures can be included to share a full picture of what may be happening as a result of your department’s actions.*

1.

2.

**6. Target(s) for Success:** *What level do you want to meet in your measurement that would indicate “success?”*

**7. Results of the Assessment:**

**7(a) Did you meet your target(s) for success?**

○ Yes

○ No

○ Partially

If Partially, please explain briefly:

Expected Student Outcome #3 continued

**7(b) Explanation of Results** *What is the summary of the data you collected?*

**8. Closing the Loop: Changes to Consider for the Future** *What changes do you plan to make as a result of this data? When do you plan on making these changes?*

**9. Overall Unit Discussion:** (optional; section is not required but can be used to share information with

your VP and the Institutional Effectiveness Committee about potential resources needed or changes

you may want to make.)

**Successes:** *What went well, as expected, or better than expected in your unit this year?*

**Concerns***: What did not go as expected or presented challenges to success in your unit this year?*

**Changes to Consider for the Future:** *Do you have any changes that you are planning to make in your unit in the future?*

**Resources Needed for Changes:** *What resources (money, time, human, access, etc.) do you need for the future to make these changes?*

**Successes:**

**Concerns:**

**Changes to Consider for the Future:**

**Resources Needed for Changes:**

Printed Name of Staff Member Completing the Plan Date

Vice President Review Signature \* Date

\* Email confirmation of that VP review has been completed can also be included.