## Program Review

## Self-Study Template

**Section A:** *Department, Functional Area, Unit, Area*

1. Department, Functional Area, Unit Name:
2. Date of Last Department, Functional Area, Unit Review:
3. Department, Functional Area, Unit Contact Information:

Director

Name:

E-mail:

Phone:

Program Review Administrative Contact

Name:

Title:

E-mail:

Phone:

1. Department, Functional Area, Unit Mission Statement
2. Strategies and tactics from department, functional area, unit strategic plan (attach strategic plan)
	1. attach strategic plan;
	2. identify completed strategies and tactics
	3. briefly discuss how the department, functional area, unit strategic plan aligns with Division of Student Life and University of Oregon mission and goals
3. Organizational structure
	1. attach organizational chart
	2. number of FTE
	3. description of units/areas, their functions, and how they are aligned to the department or functional area
4. Budget
	1. previous three years revenue and expenditures
	2. projected next year revenue and expenditures
	3. revenue sources
5. Facilities
	1. describe current facilities
	2. discuss future adequacy to meet needs of programs and services provided
6. Assessment plan and department/program outcomes (learning & development (SLOs), and administrative unit outcomes (AUOs)) and data

to consider:

1. outcomes identified, progress toward achieving outcomes, evidence of outcome achievement
2. data relevant to mission fulfillment
3. student, staff, and constituent feedback

**Section B: Professional Standards**

1. List of and evidence of adherence to relevant and applicable professional standards (e.g., CAS standards, accreditation standards, ethical standards)
2. List of and evidence of adherence to and division and department, functional area, unit standards (e.g., SL Strategy (placemat))

**Section C: Stakeholders**

1. Identify internal and external stakeholders
	1. to whom programs and services are provided
	2. with whom does department/program interface
	3. campus and community stakeholders
	4. donors

**Section D: Obstacles and Challenges/Strengths**

1. Identify and describe internal and external factors that hinder department, functional area, unit success and/or effectiveness
2. Identify key strengths that enhance department, functional area, unit success and/or effectiveness

**Section E: Areas for Improvement or Change**

1. Identify areas for improvement or change as identified by the department, functional area, unit leadership

**Section F: Other Relevant Information**

1. Discuss any additional information you determine to be relevant to the review process