

Assessment and Continuous Quality Improvement Reporting Form

Date:		
Name:		
Department/Office/Committee/Class:		
Is this Assessment tied to an Event and/or Activity?		
What process or course are you assessing?		
CLOs PLOs GLOs		
Instrument Used and/or Type of Data Collected:		
SII	Strengths ¹	
	Insights ²	
	Areas for Improvement	

Plan- PDCA	Purpose for Plan: Why is change needed?	
	Do: What are you going to do to pilot the change?	
	Check: What information and/or data will you collect to see if the change worked or made improvements?	
	When do you plan to collect the data/info as outlined above?	
	Act (this will occur in follow-up cycle): Once the changes have been made and new data has been reviewed, what recommendations do you make for future assessments, improvements, and considerations? Note: this part of the PDCA can be added to the original report or completed in a new SII	
Planned Date for Completion of Follow-up Report (after new data has been collected & analyzed):		

¹ Also explain why these are strengths

² New things you've learned about the area in question

Additional Comments	
Report Reported to (Admin/ Faculty or Chair /Committee) Please specify:	
ACPE and WSCUC Standards related to Assessment Process Reviewed Above	ACPE: WSCUC: