**Lake Erie College**

**Co-Curricular Assessment**

Please forward your program level assessment plan to the VP of the area with a copy to Terri Orlando (torlando@lec.edu), Coordinator for Academic Initiatives and Assessment.

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| --- | --- |
| **Program:** | **School or Division:** |
| **Academic Year:** | **Department:** |
| **Contact Person:** | **Contact email address:** |

**PROGRAM MISSION OR DESCRIPTION**

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**HOW DOES THIS ALIGN WITH OUR CURRENT MISSION (UNDERLINE OR HIGHLIGHT RELEVANT PORTIONS)?**

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| Lake Erie College provides an environment that stimulates intellectual curiosity, personal development and community involvement to prepare students to succeed as practitioners, professionals and responsible citizens in a contemporary world. |

**CURRENT PROGRAM LEARNING OBJECTIVES**

**PROGRAM LEARNING OBJECTIVES (A MINIMUM OF THREE)**

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| **PLO 1** |
| **PLO 2** |
| **PLO 3** |
| **PLO 4** |
| **PLO 5** |

**PROGRAM LEVEL ASSESSMENT (MINIMUM OF TWO) #1**

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| --- |
| **Method of Assessment:** |
| **To which PLO is this assessment aligned?** |
| **Achievement Target:** |
| **Summary of Results:** |
| **Action Plan for Adding Quality Improvements:** |

**PROGRAM LEVEL ASSESSMENT #2**

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| **Method of Assessment:** |
| **To which PLO is this assessment aligned?** |
| **Achievement Target:** |
| **Summary of Results:** |
| **Action Plan for Adding Quality Improvements:** |

**PROGRAM LEVEL ASSESSMENT #3**

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| **Method of Assessment:** |
| **To which PLO is this assessment aligned?** |
| **Achievement Target:** |
| **Summary of Results:** |
| **Action Plan for Adding Quality Improvements:** |

**PROGRAM LEVEL ASSESSMENT #4**

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| **Method of Assessment:** |
| **To which PLO is this assessment aligned?** |
| **Achievement Target:** |
| **Summary of Results:** |
| **Action Plan for Adding Quality Improvements:** |

**PROGRAM LEVEL ASSESSMENT #5**

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| **Method of Assessment:** |
| **To which PLO is this assessment aligned?** |
| **Achievement Target:** |
| **Summary of Results:** |
| **Action Plan for Adding Quality Improvements:** |

**SPECIFY LEARNING OUTCOMES YOU ANTICIPATE WILL BE ASSESSED NEXT YEAR**

**(If different than current action plan listed above for each assessment)**

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| **Outcome:** | |
| **Method:** | **Achievement Target:** |
| **Second Method (if applicable):** | **Achievement Target:** |

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| --- | --- |
| **Outcome:** | |
| **Method:** | **Achievement Target:** |
| **Second Method (if applicable):** | **Achievement Target:** |