

Form K
Board of Regents, State of Iowa

Review of Newly Approved Programs
July 1, 2015

REVIEW OF NEW PROGRAMS: This effort is directed at taking an internal review of new program (within 5-6 years of implementation): (1) to determine if the objectives initially outlined for the program remain current; (2) to compare the projected enrollment against the actual enrollment; (3) to analyze the status of the projected budget for the new program; (4) to determine if program changes occurred as a result of any type of assessment, especially student outcomes assessment; and (5) to analyze available outcome data (number of graduates, etc.).

1a. Institution _____

1b. College _____

2a. List title of the program: _____

2b. Provide brief description of program. _____

2c. List degree level(s) of the program (be specific): B _____ M _____ D _____ FP _____

2d. Date form was prepared: _____

3a. Has the program reviewed by non-institutional evaluators? Yes _____ No _____

3b. Number of non-institutional evaluators: _____

4. Is this the first time that this program has been reviewed since initial approval?
Yes _____ No _____

5a. Has the program met all the goals and objectives planned at the time it received approval by the Board of Regents? Yes _____ No _____

5b. If not, why not? Provide a brief description of any changes made. Attach a copy of revised goals and objectives.

6a. List projected and actual headcount enrollment for the past five years (total number of students in each level).

	Fall 20xx		Fall 20xx		Fall 20xx		Fall 20xx		Fall 20xx	
	P	A	P	A	P	A	P	A	P	A
Undergraduate										
Master's										
Doctoral										
Professional										

6b. Comment on the enrollment trend. If a significant change (20% or more), either increase or decrease, in enrollment occurred during that period at any level, please explain the reason(s).

6c. Has the enrollment met the projection described in the proposal? If not, explain the reason(s). Describe any efforts made to grow enrollment.

6d. List total number of credit hours delivered during the past five years in each level.

	Fall 20xx				
Undergraduate					
Master's					
Doctoral					
Professional					

7a. List number of graduates during the past five years.

	FY 20xx				
Bachelor					
Master's					
Doctoral					
Professional					

7b. Comment on the graduation trend. If a significant change (20% or more), either increase or decrease, in the number of graduates occurred during that period, please explain the reason(s).

7c. If available, include placement data during the five year period.

8. List the strengths, concerns, recommendations, conclusions, and program improvements resulting from this review, especially those resulting from student outcomes assessments. (Attach additional pages, if necessary.)

8a. Strengths:

8b. Concerns:

8c. Recommendations:

8d. Conclusions:

8e. Program Improvements:

9. Describe any major changes planned for the program during the next 2-3 years.

10a. Is this program accredited? Yes _____ No _____

10b. Name of accrediting agency:

10c. Date of last accreditation: _____

11. Primary program delivery: On-campus _____ Off-campus _____ Both _____

12. What was the number of FTE faculty allocated to the program during the last year of enrollment data?

13. Program revenue (tuition) for last year of enrollment data.

14. Program expenditures for last year of enrollment data.

15. Additional information.