LACCD Program Review Template

Use Tahoma, 12-point font, with 1-inch margins

I. Introduction

A. Title of unit
   Provide brief unit description and include:
   Program mission, if applicable
   Primary functions, responsibilities, or services provided
   Overall contribution to district mission, goals, or outcomes
   Description of main clientele
   Organizational structure and staffing

B. Outcomes and Objectives
   Clearly state the one or more Service Area Outcome (SAO) or Performance Objective (PO) you have selected for this program review cycle
   SAO: What will students or clients do, say, or feel about a major component of your service?
   PO: What do you do or plan to do in a major component of your services that demonstrates overall effectiveness?
   Every SAO and PO:
   Must be understandable, even to someone who does not work in the unit
   Must be measurable
   Provides clear direction related to at least one major unit component
   Describes one highly significant intended result of the unit’s services

C. Executive Summary
   Summary of sections II and III

II. Program Review

A. SAO or PO #1 [Restate the SAO or PO here]

1. Relation to higher-level mission, goals, or outcomes
   Describe how the SAO or PO links to college or district-level mission, goals, or outcomes

2. Evidence
   What evidence will indicate how well your service performed on the outcome?

3. Assessment Method
   How will you obtain this evidence?

4. Performance Standard
   What is the standard for acceptable performance?

5. Analysis and Interpretation
   What were your findings and what do they mean?

6. Conclusion
   Was the performance standard met? Yes or No
7. Changes To Be Implemented
Based on the analysis, if applicable create an Improvement Plan (IP) and include:
Clearly state the improvement the unit seeks to implement
Person or group responsible for coordinative progress on IP
Relation or contribution to higher-level goal or outcome, if any
Begin and target date for completing IP
Relative priority
Specific activities or steps in order to achieve IP
Specific measure by which you will determine progress or completion of IP
Resources required to achieve IP and best estimates of total costs, if any. Specify if one-time or ongoing and type of resource (personnel, equipment, supplies, facility, other)

B. SAO or PO #2 [Restate the SAO or PO here]

1. Relation to higher-level mission, goals, or outcomes

2. Evidence

3. Assessment Method

4. Performance Standard

5. Analysis and Interpretation

6. Conclusion

7. Changes To Be Implemented

III. Conclusion
Summary of section II

IV. Table of Evidence [Include if applicable]
Exhibit 1 [Briefly describe]
Exhibit 2 [Briefly describe]

<table>
<thead>
<tr>
<th>Unit</th>
<th>File identifier</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deputy Chancellor’s Office</td>
<td>DCO</td>
</tr>
<tr>
<td>CFO / Treasurer</td>
<td>CFO</td>
</tr>
<tr>
<td>Facilities Planning and Development</td>
<td>FPD</td>
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<tr>
<td>General Counsel</td>
<td>OGC</td>
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<tr>
<td>Human Resources</td>
<td>HR</td>
</tr>
<tr>
<td>Educational Programs and Institutional Effectiveness</td>
<td>EPIE</td>
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<tr>
<td>Personnel Commission</td>
<td>PC</td>
</tr>
<tr>
<td>Economic Workforce Development</td>
<td>WD</td>
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</tbody>
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