

APPENDIX 6.3

COVERSHEET FOR REVIEW OF AN EXISTING PROGRAM

Name of Program: \_\_\_\_\_

Check one:  Undergraduate  Graduate  Undergraduate and Graduate

Accrediting Body: \_\_\_\_\_  Undergrad Only  Grad Only  Both

Unit Offering Program: \_\_\_\_\_ Office Location: \_\_\_\_\_

Department Chair/Program Director: \_\_\_\_\_ Campus Extension: \_\_\_\_\_

Action Taken:

1. Department/Program Approval of Self-Study:

Department Chair/Program Director: \_\_\_\_\_ Date: \_\_\_\_\_

Department Graduate Advisor (Graduate only): \_\_\_\_\_ Date: \_\_\_\_\_

2. College Review of Self-Study:

Dean/Designee: \_\_\_\_\_ Date: \_\_\_\_\_

3. Academic Senate Office Receives Self-Study (Date): \_\_\_\_\_

4. External Review:  To Schedule  Not To Be Scheduled  Accredited VPAA Initials: \_\_\_\_\_

Date of Prior External Review: \_\_\_\_\_ Reviewer: \_\_\_\_\_

Date of Current External Review: \_\_\_\_\_ Reviewer: \_\_\_\_\_

Date External Report Received: \_\_\_\_\_

5. Internal Review:

PEP Council Action:  Not Applicable  Approved  Referred Back

Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Next Self-Study Due: \_\_\_\_\_

Date of Department Response to PEP Council's Review: \_\_\_\_\_

UGC Council Action:  Not Applicable  Approved  Referred Back

Chair: \_\_\_\_\_ Date: \_\_\_\_\_

Next Self-Study Due: \_\_\_\_\_

Date of Department Response to Graduate Council's Review: \_\_\_\_\_

6. Academic Affairs: Date Program Review Report Received: \_\_\_\_\_

Date Program Review Summary Filed with Chancellor's Office: \_\_\_\_\_

Date Conference Held with Academic Affairs, College, & Department: \_\_\_\_\_