



# FULLERTON COLLEGE

ELEVATING EXCELLENCE.

## *Administrative & Operational Services*

### 2015-2016 Self-Study

Three-Year Program Review Template

[Enter Program Name Here]

[Enter Division Name Here]

#### Statement of Collaboration

The department/office staff listed below collaborated in an open and forthright dialogue to prepare this Self Study. Statements included herein accurately reflect the conclusions and opinions by consensus of the department/office staff involved in the self-study.

#### Participants in the self-study

#### Authorization

After the document is complete, it must be signed by the Principal Author, the Department Manager, and (when appropriate) the Dean or appropriate Immediate Management Supervisor (IMS) prior to submission to the Program Review Committee.

_____	_____	_____	_____
Printed name of Principal Author	Signature	Title	Date
_____	_____	_____	_____
Printed name of Department Manager	Signature	Title	Date
_____	_____	_____	_____
Printed name of Dean or Immediate Management Supervisor (IMS)	Signature	Title	Date

## 1.0 Mission and Goals

Mission, Vision, Core Values and College Goals drive all college activities. The Program Review committee would like to understand the connection of your department/office to the Mission, Vision, Core Values and College Goals. Summarize how your department/office supports each area.

Mission:

Vision:

Core Values:

College Goals:

## 2.0 Department/Office Description/Data & Trends Analysis

2.1 Describe the purpose, components, and staffing of this department/office.

2.2 Staffing – complete the table below. Please list the total number of personnel in each type of position in this department/office. Within each classification in the first column, please list the position titles. For confidentiality, **do not** include the names of any people in the positions.

CURRENT STAFF					
Classification (Include position titles)	# of staff in each position title	Percent of employment	Months per year of employment	Source of funding (General / Categorical)	FTE
Managers					
Classified					
Hourly - Adult					
Hourly - Student					

Professional Experts					
	<b>Total FTE</b>				

2.3 Other Resources

<b>OTHER RESOURCES</b>				
Please list each position by classification in the department/program	Services Provided	Number of Hours	Overall Cost	Source of funding (General / Categorical)
Independent Contractors				
Volunteers				
Interns				
<b>Total Hours &amp; Costs</b>				
<b>Total FTE</b>				

2.4 Utilize the data provided in the tables above in a discussion of the appropriateness of the staffing levels of this department/office.

2.5 How does this department/office serve the population of the college?

2.6 Since the previous Program Review Self-Study what significant changes have occurred that impact the services of this department/office?

2.7 Describe any laws, regulations, trends, policies and procedures or other influences that have an impact on the effectiveness of your department/office.

2.8 Provide any other data that is relevant to your self-study.

### **3.0 Strengths, Weaknesses, Opportunities, Challenges (SWOC)**

3.1 Based on your analysis in 2.1 through 2.8, what are the strengths of your department/office?

3.2. Based on your analysis in 2.1 through 2.8, what are the weaknesses of your department/office?

3.3 Based on your analysis in 2.1 through 2.8, what opportunities exist for your department/office?

3.4 Based on your analysis in 2.1 through 2.8, what challenges exist for your department/office?

## 4.0 Service Area Outcomes (SAO) Assessment

4.1 List your SAOs and complete the expandable table below.

	Service Area Outcomes (SAO)	Date Assessment Completed	Date(s) Data Analyzed	Date(s) Data Used For Improvement	Number of Cycles Completed
1.					
2.					

4.2 Assessment: Complete the expandable table below.

<b>Service Area Outcomes Assessment for the Administrative/Operations Division of Fullerton College</b>			
Intended Outcomes	Means of Assessment & Criteria for Success	Summary of Data Collected	Use of Results
1.			
2.			

4.3 How has assessment of SAOs led to improvements in services provided to the consumer by this department/office?

4.4 What challenges remain to make your SAOs more effective?

4.5 Describe how the SAOs are linked to the [college's goals](http://college's goals). (See <http://programreview.fullcoll.edu/> )

4.6 A. What methods are used to assess the department/office's effectiveness to the population that interacts with your department/office?

B. What do the results of the above methods of assessment indicate about the effectiveness of the department/office?

C. How were the assessment results used to make improvements to services provided by this department/office? Please provide examples.

**5.0 Evaluation of Progress Toward Previous Goals** (Future program review templates for this section will identify “previous goals” as “previous strategic action plans”.)

- 5.1 List the goals from your last self-study/program review.
- 5.2 Describe the level of success and/or progress achieved in the goals listed above.
- 5.3 How did you measure the level of success and/or progress achieved in the goals listed above?
- 5.4 Provide examples of how the goals in the last cycle contributed to the continuous quality improvement of your department/office.
- 5.5 In cases where resources were allocated toward goals in the last cycle, how did the resources contribute to the improvement of the department/office?
- 5.6 If funds were not allocated in the last review cycle, how did it impact your department/office?

## 6.0 Strategic Action Plans (SAP) [formerly called Goals (6) and Requests for Resources (7)]

Using the tables below, list the strategic action plans (SAPs) for your department/office. These plans should follow logically from the information provided in the self-study. Use a separate table for each SAP.

SAPs for this three-year cycle:

STRATEGIC ACTION PLAN # 1		
Strategic Action Plan Name: (formerly called short-term goal)		
List College goal/objective the plan meets:	College Goal #:	Objective #:
Briefly describe the SAP, including title of person(s) responsible and timeframe, in 150 words or less.		
What <i>Measurable Outcome</i> is anticipated for this SAP?		
What specific aspects of this SAP can be accomplished without additional financial resources?		
If additional financial resources would be required to accomplish this SAP, please complete the section below. Keep in mind that requests for resources must follow logically from the information provided in this self-study.		
Type of Resource	Requested Dollar Amount	Potential Funding Source
Personnel		
Facilities		
Equipment		
Supplies		
Computer Hardware		
Computer Software		
Training		
Other		
<b>Total Requested Amount</b>		

## STRATEGIC ACTION PLAN # 2

Strategic Action Plan Name: (formerly called short-term goal)	
List College goal/objective the plan meets:	College Goal #: Objective #:
Briefly describe the SAP, including title of person(s) responsible and timeframe, in 150 words or less.	
What <i>Measurable Outcome</i> is anticipated for this SAP?	
What specific aspects of this SAP can be accomplished without additional financial resources?	

If additional financial resources would be required to accomplish this SAP, please complete the section below. Keep in mind that requests for resources must follow logically from the information provided in this self-study.

Type of Resource	Requested Dollar Amount	Potential Funding Source
Personnel		
Facilities		
Equipment		
Supplies		
Computer Hardware		
Computer Software		
Training		
Other		
<b>Total Requested Amount</b>		



### STRATEGIC ACTION PLAN # 3

Strategic Action Plan Name: (formerly called short-term goal)	
List College goal/objective the plan meets:	College Goal #: Objective #:
Briefly describe the SAP, including title of person(s) responsible and timeframe, in 150 words or less.	
What <i>Measurable Outcome</i> is anticipated for this SAP?	
What specific aspects of this SAP can be accomplished without additional financial resources?	

If additional financial resources would be required to accomplish this SAP, please complete the section below. Keep in mind that requests for resources must follow logically from the information provided in this self-study.

Type of Resource	Requested Dollar Amount	Potential Funding Source
Personnel		
Facilities		
Equipment		
Supplies		
Computer Hardware		
Computer Software		
Training		
Other		
<b>Total Requested Amount</b>		

## **7.0 Long Term Plans**

Describe the long term plans (four-six years) for your department/office. Please consider future trends in your narrative. Identifying financial resources needed for these plans is optional.

## **8.0 Self-Study Summary**

This section provides the reader with an overview of the highlights, themes, and key segments of the self-study. It should not include new information that is not mentioned in other sections of this document.

**Division Deans' or appropriate Immediate Management Supervisor (IMS)  
Response Page**

*I concur with the findings contained in this Program Review.*

*I concur with the findings contained in this Program Review with the following exceptions (include a narrative explaining the basis for each exception):*

*Area of exception:*

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*I do not concur with the findings contained in this Program Review (include a narrative exception):*

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