Unit Name Report:

Test unit

Evaluation Date

| Saturday, October 19, 2013 | (enter date) | | | | |
|--|--------------------------------------|------------------------|--------------|----------|--|
| Instructions: | 1) Click only 1 checkbox on each row | | | | |
| 2) When completed, SAVE file and send back to dohanlon@austincc.edu | | | | | |
| | Does not meet | Meets | Exceeds | _ | |
| | requirements | requirements | requirements | Comments | |
| | | | • | | |
| 1.1 What is your Mission? | piac | e an "⊠" in appropriat | e box | | |
| (What is the purpose of the unit? What | | | | | |
| do you do?) | | | | | |
| 1.1.1 How does the mission of the unit | | | | | |
| support the mission of the college? | | | | | |
| 1.2 Please tell us who you serve. | | | | | |
| (Faculty, staff, external partners, | | | | | |
| distance learning, students, etc.) | | | | | |
| 1.3 What services or products does the | | | | | |
| unit provide? 1.3.1 What is the impact of your unit's | | | | | |
| activities on students or other key | | | | | |
| stakeholders? | | | | | |
| 1.4 Does your unit provide services to | | 17/ | | | |
| distance learning students? | | | | | |
| 1.4.1 How do you serve distance | | | | | |
| learning students? 1.4.2 How are the services provide | HO | | | | |
| distance learning students different | | | | | |
| from the services provided to on- | | | | | |
| campus students? | | | | | |
| 1.5 If the unit offers support services | | | | | |
| such as supplemental instruction, | | | | | |
| advising, outreach, counseling, | | | | | |
| referral, tutoring, library instruction, etc, please list below. | | | | | |
| 1.6 What communication tools, | | | | | |
| methods, and strategies does your unit | | | | | |
| use to share news, updates, projects, | | | | | |
| and other information within the unit, | | | | | |
| across other college | | | | | |
| GOALS and OUTCOMES TABLE | | | | | |
| What are your Unit Goals? | | | | | |
| What are your Unit Outcomes? | | | | | |
| What are your Unit Measures? | | | | | |
| 1.7 Tell us about your unit's resources. | | | | | |
| ☐ Think about all the staff, including administrative support staff, | | | | | |
| instructional associates, technicians, | | | | | |
| etc., as well as non-staffing resources. | | | | | |
| ☐ If you have multiple budgets, please | | | | | |
| combine them for the table below. | | | | | |
| | | | | | |
| 10 15 (15 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | | | | | |
| 1.8 Is the current staffing adequate for your unit's needs? | | | | | |
| <u> </u> | 1 | Ī | 1 | | |

Unit Name Report:

| | Test unit |
|---|-----------|
| - | t |

| Evaluation Date | _ | | | |
|---|--|-----------------------|----------------------|----------|
| Saturday, October 19, 2013 | (enter date) | | | |
| Instructions: | Click only 1 checkbox on each row When completed, SAVE file and send back to dohanlon@austincc.edu | | | |
| | | | | |
| | Does not meet requirements | Meets requirements | Exceeds requirements | Comments |
| 1.8.1 If no, please describe additional staffing needs. | | | | |
| 1.9 Are the current facilities adequate for your unit's needs? | | | | |
| 1.9.1 If no, please describe facility enhancements needed. | | | | |
| 1.10 Are the unit's technology and equipment resources adequate? | | | | |
| 1.10.1 If no, please describe technology and equipment needed for | | | | |
| the unit. | | | | |
| 1.11 What other information, if any, do you believe is important for your unit to consider in planning? | | | | |

Unit Name Report:

Test unit

Evaluation Date

| Saturday, October 19, 2013 | (enter date) | | | |
|---|---------------|------------------------|--------------|----------|
| Instructions: | | checkbox on each | row | |
| 2) When completed, SAVE file and send back to dohanlon@austincc.edu | | | | |
| | Does not meet | Meets | Exceeds | |
| | requirements | requirements | requirements | Comments |
| | | | · | |
| 2.1 What sources of quantitative and/ | piac | e an "⊠" in appropriat | e box | |
| or qualitative data are you using to identify challenges and needs? | | | | |
| ☐ (Surveys, Point of Services (POS) unit feedback, ,Council for the Advancement of Standards in Higher Education (CAS) standards, Association of College Administration Professionals (ACAP) best practices, research from journals, articles, external databases, research projects, | | | | |
| presentations, conferences, white papers, etc.) | | | | |
| 2.2 What are the strengths and | | | | |
| weaknesses for the unit? | | | | |
| ☐ (What activities does the unit do well? What services, products, or decisions have been successful recently? What internal resources or situations are limiting the unit's ability | | | | |
| to achieve its goals?) 2.3 What are the opportunities threats for the unit? | | | | |
| ☐ (What events or conditions with) outside the college might the unit be well-positioned to address? What | | | | |
| events or conditions outside the unit or | | | | |
| college might pose difficulties and limit | | | | |
| the unit's ability to achieve its goals? What opportunities for growth and/ or | | | | |
| innovation exist for the unit. | | | | |
| 2.4 Describe any factors that may | | | | |
| impact the achievement of your unit's goals, either negatively or positively. | | | | |
| 2.5 Are there things the unit should be doing that are not currently being | | | | |
| done? 2.5.1 If yes, please describe. | | | | |
| Che | | | | |
| UNIT OUTCOMES TABLE | | | | |
| 2.5.2 Unit Outcomes Assessment | | | | |
| Unit Baseline data | | | | |
| Unit Curent data | | | | |
| Unit Target data | | | | |
| | | | <u>I</u> | |

Unit Name Report:

| Test unit | | | | |
|---|--------------------------------------|-----------------------|----------------------|----------------------|
| Evaluation Date | | | | |
| Saturday, October 19, 2013 | (enter date) | | | |
| Instructions: | 1) Click only 1 checkbox on each row | | | |
| | 2) When comp | leted, SAVE file ar | nd send back to d | ohanlon@austincc.edu |
| | Does not meet requirements | Meets requirements | Exceeds requirements | Comments |
| 2.5.3 If you have qualitative data that cannot be entered in data table above, please describe them | | | | |
| | | | | |
| General Comments: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

0.00%

Unit Name Report:

| Test unit | | | | | |
|---|--------------------------------------|------------------------|--------------|-----------------------|--|
| Evaluation Date | • | | | | |
| Saturday, October 19, 2013 | (enter date) | | | | |
| Instructions: | 1) Click only 1 checkbox on each row | | | | |
| | | | | lohanlon@austincc.edu | |
| | | | | | |
| | Does not meet | | Exceeds | Comments | |
| | requirements | requirements | requirements | | |
| | plac | e an "⊡" in appropriat | te box | | |
| UNIT PLAN TABLE | | | | | |
| Objectives | | | | | |
| ObjectiveMeasure | | | | | |
| ObjectiveBaselinedata | | | | | |
| Objective Target data | | | | | |
| Opportunity or challenges identified | | | | | |
| Responsible person | | | ^ | | |
| 3.2 Does the unit have sufficient | | | | | |
| control over the objectives | | | | | |
| (improvements) and key strategies to | | | | | |
| implement them effectively? 3.2.1 If not, please describe your unit | | | HAH | | |
| plans to successfully implement this | | | | Υ | |
| objective (improvement). | | | | | |
| | | | | | |
| KEY STRATEGIES, COSTS, | | | | | |
| RESOURCES TABLE | | \longrightarrow | | | |
| Objective Key Strategy | | | | | |
| Timeline | | | | | |
| Related Facilities Needs | | | | | |
| Related Staffing Needs | | | | | |
| Related Equip/Tech Needs | | | | | |
| Other Related Needs | | | | | |
| Total costs | | | | | |
| 3.4 Describe how the evaluation | | | | | |
| measures are appropriate and relevant | | | | | |
| for the proposed objectives | | | | | |
| (improvements). 3.5 Describe the process used to | | | | | |
| evaluate the results of your | | | | | |
| improvements (objectives), and | | | | | |
| indicate who participated in the review. | | | | | |
| 0 | | | | | |
| General Comments: | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Unit Name Report:

| Test unit | | | | |
|--|--------------------------------------|-------------------------|-------------------|----------------------|
| Evaluation Date | - | | | |
| Saturday, October 19, 2013 | (enter date) | | | |
| Instructions: | 1) Click only 1 checkbox on each row | | | |
| | 2) When comp | leted, SAVE file ar | nd send back to d | ohanlon@austincc.edu |
| | Does not meet | Meets | Exceeds | |
| | requirements | requirements | requirements | Comments |
| | · | ce an "⊠" in appropriat | | |
| Improvement Data Table | piac | е ап 🖂 птарргорпас | le box | |
| - | | | | |
| 4.1 Evaluation of Implemented Objectives | | | | |
| Objectives Objective Target data | | | | |
| 4.2 Briefly summarize the degree to | | A | HH | |
| which the targets were met. | | | | |
| ☐ Note the key strategies or activities | | | | |
| designed to implement the objectives | | | } | |
| (improvements) 4.3 What impact did your implemented | \leftarrow | HIV | | |
| improvements (objectives) have on the | | | | |
| unit's goals and outcomes? | | | | |
| | | | | |
| 4.4 Briefly describe how the results of | | | | |
| the improvements contributed to advancing the mission and goals of the | | | | |
| college. | | | | |
| General Comments: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

(

0.00%