

SSU Program Assessment Annual Consultation Meeting

Meeting Location *	Assessment Team Members Present: *
☐ Provost Conference Room	☐ Anita Kirkpatrick
☐ IRPA Office	☐ Nancy Linden
☐ Program's Conference Room	☐ Lisa Yount
Other:	Other:
Meeting Date/Time * :	Program: *
Department *	College *
	CLASS COBA COST SOTE
Department Chair*	Program Representative(s) Present: *

Department Chair email: *

Program Representative email: *

Program Representative email:	Program Representative email:
Meeting Objective: *	
Topic 1:*	
Topic 1 Notes/Feedback:*	
Topic 2: *	

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Topic 3:*	
	//
Topic 3 Notes/Feedback: *	
Topic 4: *	
Topic 4 Notes/Feedback: *	
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Next Steps (within the next month): *	
Next Steps (within the next semester): *	
Next Steps (within the next AY): *	
Supporting Documentation Descriptions	File
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File File

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File Supporting Documentation

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