Summary Assessment Report:

Collaborative Specialization Review

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| Collaborative Specialization Reviewed: |   |
| Participating Programs and Degrees:  |  |
| Lead Faculty: |  |
| Commissioning Officer: |  |
| Academic Year of Review: |  |

Instructions

1. This summary assessment report should be completed by the Commissioning Officer, who is the Dean of the lead Faculty.
2. The lead Dean will circulate a draft of the summary assessment report and solicit feedback from: the leads of all participating programs and their respective Deans; the Dean of the School of Graduate Studies; and the Office of the Vice-Provost, Academic Programs.
3. Once feedback is compiled and incorporated as necessary, the lead Dean will finalize the report and send it to the Collaborative Specialization Director for information.
4. The final report is provided to the Office of the Vice-Provost, Academic Programs, with the renewed Memorandum of Agreement, or a notice that admissions to the collaborative specialization have ceased and that a proposal to close the collaborative specialization is being prepared.

Previous Review

**Date of previous review (UTQAP or OCGS):**

Relevant Findings and Recommendations

Current Review

Confirm the appropriateness of specialization requirements to support the learning outcomes, or identify challenges that need to be addressed and the plans to address these challenges.

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Confirm the vitality of the Collaborative Specialization, or identify challenges that need to be addressed and the plans to address these challenges.

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Note any other strengths of the Collaborative Specialization, and/or identify any other challenges and plans to address these challenges.

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Recommended Review Outcome

1. Please select one option:

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| Please indicate choice with an (x) | Option  |
|  | Renewal of the Memorandum of Agreement  |
|  | The following changes are required: Collaborative Specialization(insert details here) Memorandum of Agreement (insert details here)  |
|  | A proposal to close the collaborative specialization should be developed for the following reason(s): (insert details here)  |

Sign-Off on Summary Assessment Report

By signing, I confirm that the leads of all participating programs and their respective Deans, the Dean of the School of Graduate Studies, and the Office of the Vice-Provost, Academic Programs, have been consulted on this report.

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Signature of lead Dean Date