

*Western Carolina University*  
 (Program Name)  
 (College Name)  
 Annual Assessment Report for 200\_-200\_

**Primary Contact Name/Info:**

Provide name and contact info for person responsible for submitting program assessment plan.

Intended Learning Outcome to be Assessed this Cycle	Method(s) of Assessment	Results of Assessment	Implementation Plan
State the outcome(s) that the program has chosen to assess this annual cycle.	Provide a summary of the methods of assessment used to assess the chosen outcome. Note any changes in the assessment measures from the program's official assessment plan.	Results must include a summary of major findings, interpretation of the results, and a description of how the results were disseminated to key stakeholders for discussion.	Identify what programmatic or curricular changes, if any, you will make as a result of the assessment results.  Each recommended action must be specific and relate directly to the outcome and results of assessment. A description of the timeline for action and the person(s) responsible must be included. In addition, please include a brief description of resources that will be critical to implementation of the actions proposed, if applicable.

**Due Annually by May 31st**