

Program Review Self-Study Report Signature Form

Please review and provide feedback on the attached self-study report. Sign, date, and return this form to the Program Review team lead. This form indicates each level has reviewed the self-study and provided feedback. Please indicate revisions were made and provide comments (optional) if necessary.

Program: _____

Chair: _____ Date: _____

Revisions Completed: Yes _____ No _____

Comments:

Dean: _____ Date: _____

Revisions Completed: Yes _____ No _____

Comments:

Graduate Dean: _____ Date: _____

Revisions Completed: Yes _____ No _____

Comments:

APAVPAA: _____ Date: _____

Revisions Completed: Yes _____ No _____

Comments:

Provost: _____ Date: _____