

Student Learning Assessment Summary

(SLAS form)

Instructions:

* Using an assessment complete the following form for each CSLO/PSLO assessed.
* Submit all forms anonymously to your department chair before the Planning & Assessment Day.

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| **Program/Degree/ Certificate**: |  |
| **Course Number and Title**: |  |
| **Course or Program Student Learning Outcome Assessed**: |  |
| **Assessment Method**:(identify and describe the assessment method) | Choose from the following:  |
| 1. Demonstration
2. Course Test/Quiz
3. Standardized Exam
4. Exit Interview
5. Group Activity
6. PreTest/PostTest
7. Survey
 | 1. Project
2. Field Placement/ Internship
3. Laboratory Project
4. Portfolio Review
5. Presentation/ Performance
6. Paper, writing assignment
7. Other
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| Method Description: |
| **Criteria for Assessment**:(institutionally shared outcome assessment criteria) | **Unsatisfactory**The student displays need for improvement in knowledge, skills, and/or abilities. | **Proficient**The student displays competency in knowledge, skills, and/or abilities. | **Mastery**The student displays expertise in knowledge, skills, and/or abilities. |
| **Results**:(record results of assessment) | \_\_\_\_\_ # of sections assessed \_\_\_\_\_\_\_ # of students assessed |
| Results Description (optional):\_\_\_\_\_\_\_ Date of results |
| Criteria Results (# of students):\_\_\_\_\_\_ Unsatisfactory \_\_\_\_\_\_ Proficient \_\_\_\_\_\_ Mastery |
| **Results Analysis**:(what did you learn?) |  |
| **Actions**:(how will you improve, if needed?) | \_\_\_\_\_\_\_\_ Date of planned action |
| * YES or 🞎 NO

The actions (above) correlate to a new or existing resource request? If yes, identify the request(s) below: |