

Walla Walla Community College
Degree/Certificate Annual Report Form — Due: Fall Quarter

Section 1. Basic Information

- **Degree/Certificate Name:** _____
 - **Department:** _____
 - **Report Year:** _____
 - **Report Submitted by (Name/Title):** _____
 - **Date of Submission (MM/DD/YYYY):** _____
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Section 2. Review of Previous Goals

Briefly summarize last year's goals/action items and outcomes.

Goals from last year:

Progress & results:

Adjustments made during the year (if any):

Section 3. Courses, Curriculum & Outcomes

(Copy from Quarterly SLOA forms where possible)

Courses reviewed this year (with associated PLOs & ILOs):

- Course: _____ |
- PLO(s): _____ | ILO(s): _____
- Course: _____ |
- PLO(s): _____ | ILO(s): _____
- Course: _____ |
- PLO(s): _____ | ILO(s): _____

Assessment methods & use of results (how results informed instruction/curriculum):

Curriculum updates/revisions/new courses:

Section 4. Student Success Data

(Use IR dashboards/reports when available; provide concise interpretation) **Enrollment**

& demographics (key trends):

Completion (150%) & Retention (fall→winter, fall→fall):

Course success rates:

Math & English completion within first year:

Employment and/or transfer outcomes (if available):

Notes/attachments (data tables or dashboards):

Section 5. Achievement Gaps & Equity Efforts

(Can be pulled from SLOA Planning forms)

Identified gaps (student groups, courses, or milestones):

Actions taken (curriculum, outreach, supports, training):

Evidence of impact (early outcomes or metrics):

Section 6. Continuous Improvement & Goals for Next Year

Changes made this year & impact on the program:

Goals or focus areas for the upcoming year:

Support/resources requested (budget, staffing, PD, tools):

Advisory committee feedback & planned incorporation (if applicable):

Section 7. Signatures

Faculty Lead:

Date:

Director/Chair:

Date:

Dean:

Date:

VPI:

Date:

Institutional Effectiveness Reviewer:

Date: