



“PROGRAM EVALUATION CHECKLIST” FOR QUALITY IMPROVEMENT PURPOSE

The Administration Office shall conduct “Program Evaluation Checklist” at diverse periods to determine overall student performance, commitment and opinion in the program of study. The Checklist will ascertain specific areas of scholastic and curricular improvement pertaining to program design, curriculum, instructional materials, assignment, examination, Faculty support etc. The Evaluation Checklist is a supportive informational tool for Program Management and Quality Improvement purpose; to be undertaken by RCM Academic Administration Dept. in cooperation with students

STUDENT INFORMATION

STUDENT FULL NAME:

STUDENT ID NR:

DATE ENROLLED:

EXPECTED DATE OF GRADUATION:

PROGRAM CHECKLIST REPORT

PROGRAM YOU CURRENTLY ENROLLED:

NUMBER OF COURSES COMPLETED: NUMBER OF COURSES REMAIN:

BRIEF REASON FOR TAKING THE PROGRAM:

RATE AND DESCRIBE COURSES CURRICULUM:

DESCRIBE YOUR EXAMS + ASSIGNMENTS:

DESCRIBE FACULTY SUPPORT RECEIVED:

DESCRIBE THE CHALLENGES FROM FACULTY COMMENTARY ON ASSIGNMENTS:

EXPLAIN THE BEST PART OF YOUR STUDY:

DESCRIBE THE CHALLENGES ENCOUNTERED IN YOUR STUDY:

EXPLAIN THE LEVEL OF YOUR COMMITMENT TO YOUR STUDY:



STATE YOUR OPINION ABOUT THE ENTIRE PROGRAM + CURRICULUM:

IDENTIFY THE SHORTFALL IN MANAGEMENT SYSTEM OF THE PROGRAM:

IDENTIFY AREAS OF IMPROVEMENT NEEDED FOR THE OVERAL PROGRAM MANAGEMENT:

WHAT NEXT AFTER COMPLETED THE CURRENT PROGRAM?

WILL YOU CONSIDER TAKING GRADUATE PROGRAM AND WHY?

PROVIDE A PERSONAL OPINION OF YOUR EXPERIENCE PERTAIN TO YOUR PROGRAM AND OUR STAFF:

PLACE + DATE: _____ STUDENT SIGNATURE: _____

ACADEMIC AND SUPPORT COMMENT:

ADMINISTRATION DEPT.:

OFFICE USE ONLY

DATE:

SIGNATURE:

SIGNATURE: