Complete a separate form for each objective

Name: __________________________________________________________  Date: ____________________

Administrative Unit/School: ____________________________________  Department: ____________________

Check:  Strategic Priority Category and Appropriate Subset:

<table>
<thead>
<tr>
<th>1.0  Accepting Responsibility, Demonstrating Accountability</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ 1.1 Implementation of institutional effectiveness system</td>
</tr>
<tr>
<td>___ 1.2 Implementation of the faculty and staff performance evaluation system</td>
</tr>
<tr>
<td>___ 1.3 Updating of the Five-Year Strategic Plans</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2.0 Supporting Academic Program Enhancement</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ 2.1 Increasing the quality of scholarly activities among the faculties</td>
</tr>
<tr>
<td>___ 2.2 Expanding the scope of faculty development activities consistent with academic priorities and initiatives</td>
</tr>
<tr>
<td>___ 2.3 Maintaining faculties, curricula and academic support services that meet accreditation requirements and strategic academic priorities</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3.0 Refining Academic Outcomes Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ 3.1 Implementation of a comprehensive Student Learning Outcomes Plan for schools, departments and disciplines</td>
</tr>
<tr>
<td>___ 3.2 Implementation of systematic assessment of program reviews and related academic support programs</td>
</tr>
<tr>
<td>___ 3.3 Implementation of a plan for systematic assessment of resources required to deliver enhanced programs and meet strategic priorities</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4.0 Enhancing the Teaching and Learning Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ 4.1 Development and implementation of a comprehensive and holistic enrollment management plan</td>
</tr>
<tr>
<td>___ 4.2 Comprehensive integration of technology into teaching across all disciplines</td>
</tr>
<tr>
<td>___ 4.3 Comprehensive integration of CAU Cultural Creed into all aspects of University operations</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>5.0 Strengthening the Management Infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ 5.1 Development and implementation of a multiyear comprehensive Financial Planning and Resource Allocation Model</td>
</tr>
<tr>
<td>___ 5.2 Revision and implementation of consistent fiscal and administrative policies and procedures</td>
</tr>
<tr>
<td>___ 5.3 Provision of technology access and availability to all faculty, staff and students at the University</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>6.0 Increasing the University’s Financial Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>___ 6.1 Engaging the Board of Trustees more effectively</td>
</tr>
<tr>
<td>___ 6.2 Enhancing the University’s capacity to attract increased private/public sector and alumni support for scholarships, endowment, facilities and academic program</td>
</tr>
<tr>
<td>___ 6.3 Maximizing the use of technology with distance learning and new teaching strategies to reach new markets</td>
</tr>
</tbody>
</table>

**Related School/Administrative Objective** (Administrative Officer’s/Dean’s Operational Plan, Form A, Column 3):

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________

**Departmental Objective** (Departmental Operational Plan, Form B, Column 3):

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
I. STATUS OF OBJECTIVE/RELATED ACTIVITIES

Indicate the status of the objectives and related activities. Were the objectives and activities:

____ Completed On-Schedule   ____ Completed Behind Schedule   ____ Not Completed

Explanation:  
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

II. OUTCOMES/RESULTS OF ASSESSMENT

Briefly describe the method(s) used for assessing outcomes/results.
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Briefly describe the outcomes/results of the application of your feedback mechanism. (Departmental Operational Plan, Form A, Column 7)
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

III. DOCUMENTATION OF ASSESSMENT METHODS/TECHNIQUES

How were assessment activities documented?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Where is the documentation maintained?
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
IV. USE OF ASSESSMENT OUTCOMES/RESULTS (Refer to: Operation Plan, Form A, Column 3)

Briefly describe how outcomes/results have been used for planning purposes, improvement/enhancement and other changes.

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________

What documentation will indicate action(s) taken based on outcomes/results, e.g. Curriculum Committee minutes.

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________

V. MAJOR ACCOMPLISHMENT(S) ASSOCIATED WITH THIS OBJECTIVE AND RELATED ACTIVITIES

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________

VI. COMMENTS

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________