PORTERVILLE COLLEGE
CURRICULUM PROGRAM REVIEW UPDATE

Name of Division:_____   Contact Person:_____

[Note: The information in this area will repeat on all pages.]

Please submit this for to the Curriculum Committee when proposing a new Course or a new Program.

Is this new Course/Program addressed in your current Program Review: YES_____ NO_____

If YES, please attach the appropriate sections.

If NO, please explain why and a rationale for the new Course/Program.

8/2018

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~~Is this new Course/Program addressed in your current Program Review~~ How is the new course/program tied to the institutional goals, strategic plan and/or educational master plan? : ~~YES_____   NO_____~~

~~If YES,~~ please attach the appropriate sections.

If NO, please explain why and a rationale for the new Course/Program.