**Undergraduate Academic Assessment Plan New Submission/Revision Form**

Check one: [ ]  New submission [ ]  Revision

Major:

College:

Effective term and year revisions will take place: Term:       Year:

1. **Revisions requested in: (select all that apply)**

[ ]  [Mission Alignment](http://assessment.aa.ufl.edu/aap-mission-statement) [ ]  [Student Learning Outcomes](http://assessment.aa.ufl.edu/aap-slos) [ ]  [Curriculum Map](http://assessment.aa.ufl.edu/aap-curriculum-map)

[ ]  [Assessment Cycle](http://assessment.aa.ufl.edu/aap-cycle) [ ]  [Methods and Procedures](http://assessment.aa.ufl.edu/aap-methods-procedures) [ ]  [Assessment Oversight](http://assessment.aa.ufl.edu/aap-oversight)

NOTE: links go to the online resource that describes the component.

1. **Briefly describe the revisions and include the revised language, and provide the rationale/justification for the revision.**

Mission Alignment

Student Learning Outcomes

Curriculum Map (use the [template](http://assessment.aa.ufl.edu/Data/Sites/22/media/aap/curriculum_map_temp_undergrad_programs.docx))

Assessment Cycle (use the [template](http://assessment.aa.ufl.edu/Data/Sites/22/media/aap/assessment_cycle_template.docx))

Methods and Procedures

Assessment Oversight

1. **If Student Learning Outcomes (SLO) is checked, please complete the following:**

What type of assessment is used?

[ ]  Course-related Exam [ ]  Capstone

[ ]  Final Paper/Project/Presentation [ ]  Course Grades

 [ ]  Course Assessments/Assignments [ ]  Standardized Exam

[ ]  Other – please describe here

1. **If Methods and Procedures is checked, please complete the following.**

Assessment method(s) used: Who applies the method?

[ ]  Rubric [ ]  Faculty Committee

[ ]  Exam [ ]  Single Faculty Member

[ ]  Other:

Which SLO(s) does this new assessment measure?

How is this new assessment method used to address the SLO(s)?

1. **Please attach both the revised Assessment Plan. Use this** [**template**](http://assessment.aa.ufl.edu/Data/Sites/22/media/aap/aap_template.docx)**.**

Department Contact Name:

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