

HCTC Course Assessment Form

Name of faculty:

Date:

Course or General Education Competency	Courses related to each competency	SLO (Student Learning Outcome)	Assignment/ Assessment criteria	Assessment finding and actions taken***

Distance Learning course? Yes ___ No ___

Report of Assessment Findings for Intended Outcome

Assessment Criteria/Expected results:

Statement of Actual Results:

Problems encountered (if minimum standard were not met):

*****Actions Taken (such as a change to curriculum, faculty or other improvement)**

Recommendations for further actions: