

SELF-STUDY TEMPLATE

[**PROGRAM NAME]**

**Date:**

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COMPLETING THE SELF-STUDY DOCUMENT

The Chair is responsible for preparing a Self-Study document that is broad-based, reflective, forward-looking and inclusive for critical analysis. It should identify any pertinent information that it deems appropriate for inclusion. The Self-Study must address and document the consistency of the program learning outcomes with the University’s mission and academic plans as well as the Degree Level Expectations, and most importantly how graduates of the program achieve those outcomes. The Self-Study should include the criteria and quality indicators listed below.

***Chair’s Declaration of Self-Study Completeness:***

I, [CHAIR’S NAME], have reviewed the Self-Study for [PROGRAM TITLE] and agree that it is complete and satisfies all of the requirements McMaster University’s Policy on Academic Program Development and Review.

Signature:

***Dean’s Declaration of Self-Study Completeness:***

I, [DEAN’S NAME], have reviewed the Self-Study for [PROGRAM TITLE] and agree that it is complete and satisfies all of the requirements McMaster University’s Policy on Academic Program Development and Review.

Signature:

# PROGRAM

## Consistency of the program with the University’s mission and academic plans.

## Program Requirements

## Alignment of Degree Level Expectations with Program Learning Outcomes

1. Program Learning Outcomes
2. Alignment with Degree Level Expectations

# ADMISSION REQUIREMENTS

## Program Admission Requirements

## Aligning Admission Requirements with Degree Level Expectations

# CURRICULUM

## Current State of Discipline

## URL for Program Calendar

## Program Innovation

## Accessibility & Inclusion

# TEACHING AND ASSESSMENT

## Curriculum Map

## Modes of Delivery

## Methods of Assessment

#### **CURRICULUM MAP TEMPLATE 1 FOR UNDERGRADUATE PROGRAMS**

|  |  |
| --- | --- |
| **Mapping Courses to Program Learning Outcomes** | **Program name** |
| **COURSE CODE** | **Required course or restricted elective** | **Program Learning Outcome:** By the end of the program, the student will be able to... | **PLO #1:** | **PLO #2:** | **PLO # 3** | **PLO #4** | **PLO #5** |
| Associated DLE(s) |  |  |  |  |  |
|  |  | **Teaching:** Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |  |  |  |  |  |
| **Assessment:** Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |  |  |  |  |  |
|  |  | **Teaching:** Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |  |  |  |  |  |
| **Assessment:** Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |  |  |  |  |  |
|  |  | **Teaching:** Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |  |  |  |  |  |
| **Assessment:** Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |  |  |  |  |  |

#### **CURRICULUM MAP TEMPLATE 2 FOR UNDERGRADUATE PROGRAMS**

|  |  |
| --- | --- |
| **Mapping Courses to Program Learning Outcomes:** | **Program name** |
| **Program Learning Outcomes** | **Associated DLE(s)** | **Course Code** |   |   |
| **Required courses or restricted elective?** |   |   |
| **PLO #1By the end of the program, the student will be able to...** |  | **Teaching** | Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |   |   |
| **Assessment** | Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |   |   |
| **PLO #2By the end of the program, the student will be able to...** |  | **Teaching** | Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |   |   |
| **Assessment** | Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |   |   |
| **PLO #3By the end of the program, the student will be able to...** |  | **Teaching** | Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |   |   |
| **Assessment** | Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |   |   |
| **PLO #4By the end of the program, the student will be able to...** |  | **Teaching** | Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |   |   |
| **Assessment** | Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |   |   |
| **PLO #5By the end of the program, the student will be able to...** |  | **Teaching** | Indicate the level (basic, intermediate, advanced) at which the PLO is covered. Provide examples where appropriate. |   |   |
| **Assessment** | Indicate what assessments you use to determine the extent to which this outcome is achieved by the end of your course. Provide examples where appropriate. |   |   |

####

#### **CURRICULUM MAP TEMPLATE FOR GRADUATE PROGRAMS**





# RESOURCES & PROGRAM REQUIREMENTS

**Note: Please be sure to complete the appropriate section based on whether you are undergoing an Undergraduate or a Graduate Cyclical Program Review. The information requested may differ between undergraduate and graduate programs.**

## UNDERGRADUATE PROGRAMS

### Use of Existing Human, Physical and Financial Resources

### List of Faculty Members Involved in Delivery of Program

***Template 1:***

|  |  |
| --- | --- |
| **Name of Faculty Member** | **Class of Appointment** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

##

## GRADUATE PROGRAMS

### Use of Existing Human, Physical and Financial Resources

### List of Faculty Members Involved in Delivery of Program

|  |
| --- |
| **Faculty Members by Field** |
|  |  |  | **Fields if applicable** |
| **Faculty Name & Category of Appointment** | **Home Unit 1** | **Supervisory Privileges 2** | **13** | **2** | **3** | **4** |
| ***Category 4*** |  |  |  |  |  |  |
| **Aaaa - Assistant** |  | Master’s | x |  | x |  |
| **Bbbb - Professor** |  | Full | x | x |  |  |
| **Cccc - Associate** |  | Full |  |  |  | x |
| **Dddd - Professor** |  | Master’s |  | x | x |  |
| ***Category 2*** |  |  |  |  |  |  |
| **Eeee - Associate** |  | Master’s |  |  |  |  |
| ***Category 3*** |  |  |  |  |  |  |
| **Ffff - Assistant** |  | Master’s |  |  |  |  |
| ***Category 4*** |  |  |  |  |  |  |
| **Gggg- Professor (X)** |  | Full |  |  |  |  |
| Etc. |  |  |  |  |  |  |

1. This is the budget unit paying the salary: department, school, research centre or institute, or other.
2. Indicate the level of supervisory privileges held by each faculty member: e.g., full, master’s only, co-supervision only, etc.,
3. Either give the field name or a footnote reference to it.
4. List faculty members under the categories suggested, as applicable

Category 1: tenured or tenure-track core faculty members whose graduate involvement is exclusively in the graduate program under review. For this purpose the master’s and doctoral streams of a program are considered as a single program. Membership in the graduate program, not the home unit, is the defining issue.

*Category 2:* non-tenure-track core faculty members whose graduate involvement is exclusively in the graduate program under review.

*Category 3:* tenured or tenure-track core faculty members who are involved in teaching and/or supervision in other graduate program(s) in addition to being a core member of the graduate program under review.

*Category 4:* non-tenure track core faculty members who are involved in teaching and/or supervision in other graduate program(s) in addition to being a core member of the graduate program under review.

*Category 5:* other core faculty: this category may include emeritus professors with supervisory privileges and persons appointed from government laboratories or industry as adjunct professors. Please explain who would fall into this category at your institution.

*Category 6:* non-core faculty who participate in the teaching of graduate courses.

**Note**: Academic units can opt to include additional columns with demographic information about their faculty members, as appropriate.

# QUALITY INDICATORS

## UNDERGRADUATE Commentary and Context of Data Sets

The Office of Institutional Research and Analysis (IRA) will provide programs going through the IQAP cyclical review with access to program-relevant data through the IQAP BI Portal

## GRADUATE Commentary and Context of Data Sets

The Office of Institutional Research and Analysis (IRA) will provide programs going through the IQAP cyclical review with access to program-relevant data through the IQAP BI Portal

Required Graduate Program Criteria:

### Time-to-Completion

### Quality and Availability of Graduate Supervision

|  |
| --- |
| **Completed and Current Numbers of Thesis1 Supervisions by Faculty Member** |
|  | **Completed** | **Current** |
| **Member** | **Master’s** | **PhD** | **PDF** | **Master’s** | **PhD** | **PDF** |
| **Aaa** |  |  |  |  |  |  |
| **Bbb** |  |  |  |  |  |  |
| **Ccc** |  |  |  |  |  |  |
| **Ddd** |  |  |  |  |  |  |
| **Eee** |  |  |  |  |  |  |
| **Ffff 3** | **2(15)** | **3(10)** | **6** | **1(5)** | **0(3)** | **2** |
| **Gggg** |  |  |  |  |  |  |

1. If desired, columns (or an additional table) may be added to reflect the supervision of major research papers at the master’s level. Do not include supervisory committee activity in this table.
2. Faculty members who are involved in more than one graduate program should list the number of students supervised in the program under review and, in parentheses, the total number of students supervised in all graduate programs. (e.g., Ffff is currently supervising 1 Master’s student in the program under review and 5 in total.)

**Note:** If there are different types of degrees (e.g., MA, PhD) separate categories should be added to the table

### Evidence of Faculty, Student and Program Quality

# PROGRAM ENHANCEMENT

## Previous Concerns & Recommendations

## Quality Enhancement

## Area(s) of Improvement

## Area(s) of Enhancement

# SYSTEM OF GOVERNANCE

# ACADEMIC SERVICES

# PARTICIPATION IN SELF-STUDY

|  |  |  |
| --- | --- | --- |
| **Name** | **Faculty Member / Student / Staff**  | **Role in Self-Study** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

# ADDITIONAL INPUT