

**AGREEMENTS INVOLVING JOINT AND DUAL ACADEMIC AWARDS – ANNUAL ASSESSMENT AND PERIODIC REVIEW
REPORT**

Name of Program _____

UTSA Sponsor _____ Title _____

Department _____ College _____

Annual Assessment Report (Attach more pages as necessary):

Summary of Outcomes Assessment (Use performance metrics identified in Information Form):

Response to Outcomes:

This report has been shared with the sponsor at the institution/organization collaborating with UTSA on this agreement, and with the Associate Vice Provost for Assessment.

Sponsor's Signature _____ Date _____

Periodic Review (Attach more pages as necessary):

Summary:

Decision: Program will be: _____Continued _____Modified _____Discontinued

Sponsor's Signature _____ **Date** _____

APPROVALS (In Order of Authority):

Department Chair/Director Authorization:

_____ _____

Printed Name

Signature

Date _____

Dean/AVP Approval of Decision:

_____ _____

Printed Name

Signature

Date _____

Vice Provost and Dean of University College Approval of Decision (for Undergraduate programs: review by Vice Provost's office and consultation with SACSCOC Liaison)

Printed Name Signature

Date_____

Vice Provost and Dean of the Graduate School Approval of Decision (for Graduate programs: review by Vice Provost's office and consultation with SACSCOC Liaison)

Printed Name Signature

Date_____

Provost and Vice President for Academic Affairs Approval of Decision:

Printed Name Signature

Date_____

SACSCOC Liaison Approval of Decision:

Printed Name Signature

Date_____