*This document will be for the President and Provost’s use during their meeting(s) with the onsite evaluators. Please ensure there is accurate, current, and appropriate information to guide them and limit this summary to no more than 3 single spaced pages.*

**Date of site visit:**

Click here to enter text.

**College:**

Click here to enter text.

**Department:**

Click here to enter text.

**Description of the program(s) being reviewed (if more than one degree, describe each briefly):**

Click here to enter text.

**Degree(s) being reviewed & number of students:**

Click here to enter text.

**Degrees conferred for the most recent 5 years:**

Click here to enter text.

**Number of faculty supporting program:**

Click here to enter text.

**Status of program with accrediting agency (i.e. accredited, accredited, no recommendations/reporting requirements; accredited with reporting requirements, probation, etc.):**

Click here to enter text.

**If there are outstanding recommendations, please list and describe response to each:**

Click here to enter text.

**List 3 bullets of aspects in which the program performs well and a brief explanation of each:**

Click here to enter text.

**List 3 bullets of challenges that the program currently experiences and briefly describe what action the faculty are taking to address each issue:**

Click here to enter text.

**Does this accrediting agency require a specific faculty to student ratio?**

Click here to enter text.

**If so, what is it?**

Click here to enter text.

**What is UNLV’s?**

Click here to enter text.

**Are clinical sites used in this degree(s)?**

Click here to enter text.

**If so, what is the accrediting agency’s required mentor to student ratio?**

Click here to enter text.

**What is UNLV’s mentor to student ratio?**

Click here to enter text.