SLO Assessment Results Form

Please enter your SLO assessment results below. You will need to fill this form out separately for each SLO in your course. For example, if you have two SLOs for your course, you'll need to complete this form twice.

| Instructor Name |
|-----------------------------------|
| |
| |
| Instructor Email Address |
| |
| |
| Please Select: |
| Course |
| SLO |
| Term Assessed |
| Telli Assessed |
| · · |
| |
| Number of students assessed |
| |
| |
| Number of students who met target |
| |

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| haracters remaining: 150 | | |
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| I'm not a robot | reCAPTCHA | |

Submit

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