

KCCD District Office Administrative Unit Review

Unit Name:

Executive Summary

Provide a brief abstract or synopsis of your unit's current circumstances and needs.

Section One: Unit Overview

KCCD Mission: The mission of the Kern Community College District is to provide outstanding educational programs and services that are responsive to our diverse students and communities.

Describe how the unit supports the KCCD Mission:

Describe how the unit supports the colleges in achieving their mission and their efforts to improve student learning and achievement (ACCJC Std IV.D.2, IV.D.5, IV.D.7):

Provide an organizational chart to show how the unit is structured:

Section Two: Administrative Unit Outcomes (AUOs)

- a) List all the AUOs for the unit. AUOs describe what the colleges will understand, experience or obtain as a result of the service the unit provides to the colleges. Describe the method of assessment and the criteria used to determine success in the service provided to the colleges. The assessment method should include some way of measuring college demand or need for the service. (Add additional rows as necessary.)

Administrative Unit Outcome (AUO)	Strategic Plan Alignment	Review Period	Method of Assessment	Criteria for determining success in service provided to colleges

- b) Summarize the results from any AUOs evaluated during the past year, including college feedback on services rendered during the past year. Provide details about findings and plans for change or improvement of service to colleges.

Section Three: Progress on Unit Goals

a) List the unit's current goals. For each goal, discuss progress and changes. Provide an action plan for each goal that gives the steps to completing the goal and the timeline. (Add additional rows as necessary.)

Unit Goal	Which institutional goals from the KCCD Strategic Plan will be advanced upon completion of this goal?	Progress on goal achievement (choose one)	Status Update — Action Plan	Colleges requesting accomplishment of this goal. (Include documentation of request.)
1.		<input type="checkbox"/> Completed: _____ (Date) <input type="checkbox"/> Revised: _____ (Date) <input type="checkbox"/> Ongoing: _____ (Date)		
2.		<input type="checkbox"/> Completed: _____ (Date) <input type="checkbox"/> Revised: _____ (Date) <input type="checkbox"/> Ongoing: _____ (Date)		

b) List new or revised goals if applicable. (Add additional rows as necessary.)

Replacement Goal	Which institutional goals from the KCCD Strategic Plan will be advanced upon completion of this goal?	Status Update — Action Plan	Colleges requesting accomplishment of this goal. (Include documentation of request.)

Section Four: Unit Analysis

Take a look at your trend data (key performance indicators for the past three years).

1. What unexpected changes or challenges did your unit encounter this cycle?

2. How does your trend data impact your decision-making process for your unit?

3. Were there any changes in college satisfaction with the services your unit provided to the colleges?

Section Five: Current Unit Resources

a) List the unit's current resource levels by outlining existing staff, listing major technology/equipment the unit uses, describing the space the unit occupies, and the unit's current budget.

Resources	Current Level (Give amounts in FTE)
Staffing (list current staffing levels)	
Technology / Equipment	<ul style="list-style-type: none"> • • •
Space / Facilities	<ul style="list-style-type: none"> •
Budget (Unrestricted) Total	\$ Notes (if any)
1000 (Academic Salaries)	\$
2000 (Classified + Administrator Salaries)	\$
3000 (Employee Benefits)	\$
4000 (Supplies & Materials)	\$
5000 (Operating Expenses and Services)	\$
6000 (Capital Outlay)	\$
7000 (Other Outgo)	\$
Budget (Restricted) Total	\$
Budget (Contract/Community Ed) Total	\$

Section Six: Resource Augmentation Analysis

Discuss the impact of new resources your unit received during this year's cycle that are in addition to what your unit had in the previous cycle.

Resource Received		Discuss how the new resource impacted your unit's effectiveness in providing service to the colleges
Positions: <i>Discuss the impact new and/or replacement management and/or staff had on your unit's service to the colleges..</i>	<input type="checkbox"/> 1: Classified Staff <input type="checkbox"/> 2: Administrator	
Professional Development: <i>Describe briefly, the effectiveness of the professional development your unit has been engaged in (either providing or attending) during the last cycle</i>	<input type="checkbox"/> 1: Provided Professional Development <input type="checkbox"/> 2: Attended Professional Development	
Facilities: <i>If your unit received a building remodel or renovation, additional furniture or beyond routine maintenance, explain how this request or requests impacted your unit's service to the colleges.</i>	<input type="checkbox"/> 1: Space Allocation <input type="checkbox"/> 2: Renovation <input type="checkbox"/> 3: Furniture <input type="checkbox"/> 4: Other <input type="checkbox"/> 5: Beyond Routine Maintenance	
Technology: <i>If your unit received technology (audio/visual – projectors, TV's, document cameras) and computers, explain how the technology impacted your unit's service to the colleges.</i>	<input type="checkbox"/> 1: Replacement Technology <input type="checkbox"/> 2: New Technology <input type="checkbox"/> 3: Software <input type="checkbox"/> 4: Other _____	
Other Equipment: <i>If your unit received equipment that is not considered audio/visual or computer equipment technology, explain how these resources impacted your unit's service to the colleges.</i>	<input type="checkbox"/> 1: Replacement <input type="checkbox"/> 2: New <input type="checkbox"/> 3: Other _____	

Section Seven: Resource Request Analysis

Discuss the impact of new resources your unit is requesting for next year’s cycle that are in addition to what your unit currently has in this cycle. Indicate the expected cost along with the rationale. Rank the proposals in order of their importance to the unit (“1” is most important; “5” is least important)

Resource Requested	Include Cost	Discuss how the new resource will impact your unit’s effectiveness in providing service to the colleges	College(s) requesting this new resource to your unit	Rank
Positions: <i>Discuss the impact new and/or replacement management and/or staff will have on your unit’s service to the colleges.</i>	<input type="checkbox"/> 1: Classified Staff <input type="checkbox"/> 2: Administrator			
Professional Development: <i>Describe briefly, the effectiveness of the professional development your unit will be engaged in (either providing or attending) during the next cycle</i>	<input type="checkbox"/> 1: Provide Professional Development <input type="checkbox"/> 2: Attend Professional Development			
Facilities: <i>If your unit receives a building remodel or renovation, additional furniture or beyond routine maintenance, explain how this request or requests will impact your unit’s service to the colleges.</i>	<input type="checkbox"/> 1: Space Allocation <input type="checkbox"/> 2: Renovation <input type="checkbox"/> 3: Furniture <input type="checkbox"/> 4: Other <input type="checkbox"/> 5: Beyond Routine Maintenance			
Technology: <i>If your unit receives technology (audio/visual – projectors, TV’s, document cameras) and computers, , explain how this request or requests will impact your unit’s service to the colleges.</i>	<input type="checkbox"/> 1: Replacement Technology <input type="checkbox"/> 2: New Technology <input type="checkbox"/> 3: Software <input type="checkbox"/> 4: Other _____			
Other Equipment: <i>If your unit receives equipment that is not considered audio/visual or computer equipment technology, , explain how this request or requests will impact your unit’s service to the colleges.</i>	<input type="checkbox"/> 1: Replacement <input type="checkbox"/> 2: New <input type="checkbox"/> 3: Other _____			
Total cost of resource needs over and above current budget allocation:			\$	

Section Eight: Conclusions

Present any conclusions and findings about the unit.

Submitter's Name: _____ Title: _____

Submitter's Signature: _____ Date: _____

Submitter's Immediate Supervisor: _____ Title: _____

Date of Review: _____

Chancellor's Signature: _____ Date of Review: _____

Date of Presentation to District Consultation Council: _____