

KRS 164.295 was amended in 2011 to allow comprehensive universities, with some restrictions, the ability to offer advanced practice doctorates. The legislation requires comprehensive universities to provide annual reports to the Council identifying the full cost of and all funding sources for each approved doctoral program and the performance of each approved program.

**ADVANCED PRACTICE DOCTORATE:**

**ANNUAL REPORT TEMPLATE**

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| --- | --- |
| Institution:  | Degree Designation as on Diploma: |
| Program Name:  | CIP Code: |
| Program Implementation Date: | Report Submission Date: |

**A. Program Quality and Student Success**

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| 1. Briefly describe assessment results and explain how these results have been used to make improvements to the program. |
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| 2. Describe any external awards or other recognition of the students, faculty, and/or program from the past year.  |
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| --- | --- | --- | --- | --- | --- | --- |
| 3. a. The number of hours required to complete this program is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ b. Include the average actual time to degree for this program in the table below.  c. Include the average actual credit to degree is for this program in the table below.

|  |  |
| --- | --- |
|  | Year:  |
| Average actual time to degree |  |
| Average actual credit to degree |  |

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| 4. a. Describe employer satisfaction with program graduates.  b. Describe graduating candidates’ and alumni satisfaction with the program.  |
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| 5. Include the job placement data for program graduates.  |
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| --- | --- |
|  | Year: |
| Number of graduating students who sought employment |  |
| Percentage of students who sought employment |  |
| Number of graduating students who gained employment |  |
| Percentage of graduating students who gained employment |  |
| Percentage of students finding employment in area of geographic responsibility |  |
| Percentage of students finding employment in Kentucky |  |
| Percentage of students finding employment outside of Kentucky |  |

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| --- | --- |
|  | Year: |
| Type of Job: | Percentage of students employed in that type |
| Type of Job: |  |
| Type of Job: |  |

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| 6. Does this program lead to licensure or certification? If yes, then include students’ pass rates on licensure/certification exams. |
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| --- | --- |
| Name of exam: | Year: |
| Pass rate |  |

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| 6. Provide the number of students enrolled and the number of graduates for the past academic year. |
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| --- | --- |
|  | Year: |
| Enrollment |  |
| Degrees Conferred |  |

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**Cost and Funding**

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| --- | --- | --- | --- | --- |
| 1. Note the program’s student credit hour per instructional faculty FTE for the past year.

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| --- | --- |
|  | Year: |
| Student credit hour per instructional faculty FTE |  |

2. Provide brief descriptions of all funding sources that are not from state or tuition sources.3. Complete the attached budget spreadsheets (Breakdown of Budget Expenses and Funding Sources). |