

Appendix E. Signature Page for External Consultants

Each member of the external review panel should complete the form below, attach it to a copy of the Program Review Report, and return it to: Program Review Officer, California State University, Fresno, 5241 N. Maple Ave. M/S TA51 Fresno CA 93740-8027

DISCIPLINARY SPECIALIST

This report was prepared by:

Signature:

Date:

Institution:

COLLEGE REPRESENTATIVE

I have read the Program Review Report for the _____ program and

- concur
- concur with the following reservations:
- disagree and have attached a statement

Printed name (College Representative):

Signature:

Date:

UNIVERSITY REPRESENTATIVE

I have read the Program Review Report for the _____ program and

- concur
- concur with the following reservations:
- disagree and have attached a statement

Printed name (College Representative):

Signature:

Date:

ALUMNI/COMMUNITY REPRESENTATIVE

I have read the Program Review Report for the _____ program and

- concur
- concur with the following reservations:
- disagree and have attached a statement

Printed name (College Representative):

Signature:

Date: