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| --- | --- |
| **INFORMATION ITEM** | **Meeting Date** |
| **Item Name** |
| Program Title: |  |
| Campus, School/Department:  |  |
| Contact Name/Info: |  |

1. Explain the program’s lower than projected enrollment. (100 words)
2. What steps have or will be taken to improve enrollment, resize or augment the program to rebalance costs and revenues, or close the program? (250 words)
3. Complete the “Level II Fiscal Analysis Follow-up Form

Signature/Date

**College or School Dean:**

**Chief Academic Officer:**

**Chief Executive Officer:**

**Flagship Provost\*:**

**Flagship President\*:**

\*Not applicable to the Community Colleges.