Data Use Report Form
Teacher Education Unit, Eastern Mennonite University
COVER SHEET

Group Reviewing the Data (Check one):

- ☐ Department
- ☐ Program Faculty
- ☐ Committee on Teacher Education (COTE)
- ☐ Assessment Committee

Date of Meeting: _____

Name of Person Submitting Report: _____

- ☐ UG Department Chair
- ☐ Program Coordinator
- ☐ COTE Co-chair
- ☐ Director of MA Education
- ☐ Unit Assessment Coordinator

Data Set/ Date Assessment was administered_____
(Example: Final Student Teaching Evaluations/Spring 2009)

Instructions: Data are reviewed in the unit to make three types of decisions: (1) to make changes in the unit/department/individually in order to increase effectiveness; (2) to continue with something that is working; and (3) to monitor over a longer period of time. This form is completed by one of the following leaders of data-driven decision-making: program coordinator, department chair, MA Director, assessment coordinator, or co-chair of the COTE.

1. Please complete the form.
2. Save an electronic copy or pdf to the appropriate Data Use Report Form folder under UAS on the network.
3. Insert paper copy into appropriate Minutes binder.
4. Send an e-copy or pdf to the Assessment Coordinator.

Schedule of Data Review

Reviewer Codes:
U=Unit (typically COTE) D=Department (UG or MA) P=Program faculty

Data Set: CIRCLE ONE	**Schedule of Review (Reviewer): CIRCLE ONE**	
Unit Operations Survey	Sept/Oct (D)	Nov by COTE (U)
1st/5th Year Alumni Surveys	Oct (D)	Nov by COTE (U)
Endorsement area data: Biennial measures (Praxis II, RVE, DOSL) and/or SPA data*	May (P)	August/Sept (D or U for curriculum change decisions)
Field Experience: Profiles of Performance, Part E*	May (P)	August/Sept (D or U for curriculum change decisions)
Final Student Teaching Evals*	May (P)	February (D of all programs)
Key Assessment Data (MA)	Sept (P)	Sept (D-MA or CORP for curriculum change decisions)
*Data will be reviewed every year; decisions will be made every other year to ensure that the sample size of data is large enough to be considering change.		

Guidelines for Data Interpretation and Use:

1. Assess the quality and adequacy of the data. Considerations include:
    a. *Sampling methods, representativeness of sample, and sample size.* Is this a large, random and representative sample from the appropriate population? If not, what biases, outliers, or other limitations have impacted the inferences drawn from these data?
    b. *Reliability and validity.* Is there evidence of reliability (e.g., stability over time, internal consistency, inter-rater reliability)? Are the inferences drawn from these data supported by other evidence?
    c. *Purpose of the data collection.* Is the decision congruent with the intended use of these data?
2. Maintain the anonymity and confidentiality of individuals; do not use names or other data that will reveal identity in this report.
3. Interpret data objectively, without regard to personal experience and knowledge of individuals, programs or the unit.
4. Consider alternative interpretations and solutions before proceeding with a course of action.

Data Use Report Form
REPORT SHEET

1. Based on the data reviewed today, what evidence or trends appear to indicate strengths of the program, department, or unit?
   - Strengths?
   - Describe the data that demonstrate these strengths.
   - Do any other data sets confirm or dispute these strengths? Explain.

2. Based on the data reviewed today, what evidence or trends appear to indicate that improvements are needed in the program, department, or unit?
   - Improvements needed?
   - Describe the data that demonstrate the need for improvement.
   - Do any other data sets confirm or dispute this need for improvement? Explain.

3. What type of decision is made, based upon this review? *Check one box and explain the decision and rationale.*
   - ☐ No change is needed: data indicate that program/department/unit is effective.
   - ☐ The following change is needed. . . because. . . . (Describe the change and the data that support this decision.)

   _____

   _____

   - ☐ The data will be monitored until _____ and reviewed at that point in time to further measure _____.
   - ☐ ***Need for more information***. Additional data, information, or re-analysis that you need for decision-making:

4. Describe a prospective process for change, including timelines (if appropriate), and progress indicators.

5. Date that I saved this file/pdf to the *G-drive: UAS/Decision Doc Charts/year/your* folder: _____

6. Date that I sent an e-copy/pdf of this report to the Assessment coordinator: _____

Electronic or scanned SIGNATURE of REPORT WRITER: _____

Date of this Report: _____