***Program Name, Level and CIP***

* **Reviewer Information**

***Reviewer Name(s)***

*Reviewer’s Title (I.E. chair, professor, or dean)*

*Reviewer’s Home University*

*Link to CV*

* **Review Dates:** *Start Date – End Date*

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|  | | **Travel and Accommodations** | | | |
|  | Flight Information:   * Airline * Flight Number * Arrival Time   ***Reviewer(s) to call departmental person upon arrival.*** | |  | Hotel Information:   * Name * Address * Phone Number | Departmental person providing transportation from airport to hotel:  Cell Phone #: |
| **DAY 1 – DATE** | **Meeting** | |  | **Location** | **Person Escorting** |
| 5:30 PM | Pick-up Reviewer | | Required | Meet reviewer(s) in Lobby of Hotel | Person providing transportation:  Cell Phone #: |
| 6:00 PM | **Opening Dinner:**  **Attendees**: Dean or Associate Dean, Provost Office Representative & Reviewer(s)  **Purpose**: Discuss program(s) and expectations for the review  IE will schedule with Dean’s Office, make reservation, and pay for the dinner | | Required | Restaurant Information:   * Stonewood Grill * 17050 Palm Pointe Drive, Tampa, FL 33647 * 813-978-0388 * Name Reservation is Under --- USF Academic Program Review – Jonna DeSantis |  |
| **DAY 2 –**  **Date** | **Meeting** | |  | **Location** | **Person Escorting** |
| 7:50 AM | Breakfast with reviewer(s)  Attendees: | | Optional | Breakfast Location: | Departmental person who will be escorting the reviewer(s) to breakfast and then to campus |
| 8:45AM – 9:00AM | Pick-Up Reviewer and transport to campus | | Required | Reviewer Hotel |  |
| 9:00 – 9:30 AM | Initial meeting (colleges may/may not request meeting) | | Optional | Meeting Location: | Departmental person who will be escorting the reviewer(s) to/from meeting |
| 9:30 –11:00 AM | Meetings with professors, graduate students, undergraduate students, staff  (Meeting times to be scheduled by Department) | | Required | Meeting Location: | Departmental person who will be escorting the reviewer(s) to/from meeting |
| 11:00 – 12:00 PM | Meeting with graduate school *(Please schedule if a graduate program is being reviewed)* | | Optional | Meeting Location: | Departmental person who will be escorting the reviewer(s) to/from meeting |
| Noon - 2:00 PM | Lunch meeting with:   * Department Chair * Professors of Reviewed Program * Reviewer(s)   IE pays for five attendees. This number includes reviewer(s). Department pays for additional attendees. IE will make reservation. Department organizes attendees. | | Required | Meeting Location:   * Top of the Palms, * 3rd Fl., Marshall Center * Reservation is under Jonna DeSantis | Departmental person who will be escorting the reviewer(s) to lunch |
| 2:00 – 5:15 PM | Meetings with professors, graduate students, undergraduate students, staff  (Meeting times to be scheduled by Department) | | Required | Meeting Location: | Departmental person who will be escorting the reviewer(s) to/from meeting |
| 5:15 – 6:15 PM | Reviewer(s) time to prepare for exit meeting and begin drafting final report | | Optional |  |  |
| 6:30 PM | Dinner with selected faculty members:  Attendees:  (Organized and Paid for by Department) | | Required | Restaurant name and address: | Departmental person who will be escorting the reviewer(s) to/from dinner  Cell Phone #: |
| **DAY 3—**  **Date** | **Meeting** | |  | **Location** | **Person Escorting** |
| AM | Check out of hotel | |  |  |  |
|  | Short Exit Meeting with Department Chair (If needed) | | Optional | Meeting Location: | Departmental person who will be escorting the reviewer(s) to/from meeting |
| 9:30 – 11:00 AM | **Exit Meeting**  **Attendees**: Provost and/or Associate Provost, Dean and/or Associate Dean, Chair, Program Director(s) and Reviewer(s)  **Purpose**: Reviewer(s) to provide brief overview of program visit and discussion regarding program.  (Meeting is organized by IE) | | Required | Location:   * Patel Center or Virtual | Departmental person who will be escorting the reviewer(s) to/from meeting |
|  | Debrief and/or meetings with final group (If needed) | | Optional | Meeting Location: | Departmental person who will be escorting the reviewer(s) to/from meeting |
|  | | **Travel Information** | | | |
|  | Flight Information:   * Flight Number * Departure Time | |  |  | Departmental Person who will be taking reviewer(s) to the airport |

NOTE: Who the reviewer(s) meet(s) (students, staff, faculty, etc.), duration of meetings, location of meetings, and what facilities/labs the reviewer(s) visit(s) is at the discretion of the department. **The department organizes these meetings.** Some colleges like to schedule a meeting with the Dean/Associate Dean. If this is something that the Dean/Associate Dean would like, then the department should contact the Dean’s Office to schedule. If reviewing a graduate level program, we recommend that the department contact Graduate Studies to schedule a meeting. Consider allowing time for transition from one meeting to the next and coffee breaks.

Please remember that all ground transportation during the visit is the responsibility of the department, including pick-up from and return to the airport.

THIS ITINERARY IS A TEMPLATE ONLY! Please feel free to use this template or another itinerary that works best for the department. Please remove as this is a successful template