Program Review: Recommendations with Projected Costs 

[Program Credential & Name]

[This table accompanies the Self-Study Report. Please copy the information for the first 5 columns from the Self-Study Report, and add information for the projected costs and operating plan year (ie fiscal year, for example 2024-25) for each recommendation. **This document will not be distributed to the External Review Team.**]

| Section References  (Self-Study Report) | # | Recommendations | Estimated Timeline  (start - end) | Resources (e.g. People and/or BCIT Department) Required | Projected Costs\* | | Operating Plan Year |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Annual Operating Cost | One Time Cost (e.g. Capital, Curriculum) |
|  | 1 |  |  |  |  |  |  |
|  | 2 |  |  |  |  |  |  |
|  | 3 |  |  |  |  |  |  |
|  | 4 |  |  |  |  |  |  |
|  | 5 |  |  |  |  |  |  |
|  | … |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**\*Any costs associated with implementing recommendations need to be built into the school budget**. **This table (particularly costs and timing) must be approved by the School Dean prior to forwarding it to the Academic Planning & Quality Assurance Office**, together with the Self-Study Report.