## TEXAS HIGHER EDUCATION COORDINATING BOARD

Academic Quality and Workforce

## **Graduate Program Institutional Response Form**

**Doctoral** 

Masters

**Institution:** University of Houston **Department/School: Academic Program: Scholars:**(First & Last Name, University/College Affiliation) **Visitation Dates:** On Campus **Desk Review** The department hosted an external review team composed of the above listed scholars. The external review team produced an External Review with comments reflecting their overall impression of the graduate program. In this institutional response to the recommendations from the external review team, a response and action plan relative to the primary review recommendations are provided in the attached document. The program director, department chair and dean of the college or representatives should sign the institutional response. Program Director (Print and sign) Department Chair (Print and sign)

Dean of the College (Print and sign)