

# Learning Outcomes Measurement Form

Course Name

Instructor

Semester / Year

Course Learning Outcomes

Learning Outcome	Measurement Method	Performance Criteria	Result / Achievement Level
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Improvement Actions (if needed)

Comments