

## ASSESSMENT OF FOCUS AREA PLAN (F1)

Date: \_\_\_\_\_ Student Name: \_\_\_\_\_

Student ID#: \_\_\_\_\_ Student E-mail: \_\_\_\_\_

Faculty Mentor: \_\_\_\_\_ Professional Advisor: \_\_\_\_\_

**F-1: Can design a plan for development in an area of specialization, based on an analysis of the elements that comprise the area.**

**The Learning Experience:** Through *Foundations* course resource materials and course assignments, readings, personal interviews, research, class discussions, and/or other assignments designed by the Faculty Mentor and Professional Advisor, the student: 1) defines an area of specialization; 2) identifies the relevant knowledge base; 3) identifies specialized skills; 4) clarifies career opportunities; 5) articulates the economic status of the chosen occupational or vocational area; 6) evaluates her/his own current level of skills, knowledge, education, and experience; and, 7) develops skills to track current and future career or focus area trends.

**Evidence of Competency:**

\_\_\_\_\_ The student has completed and attached the Professional Goal and Action Plan (PGAP), which includes research on the trends affecting the student's professional or academic area.

\_\_\_\_\_ The student has researched her/his focus area and developed at least 8 reflective annotations of relevant books, articles or interviews

\_\_\_\_\_ The student has demonstrated competency through oral presentations and discussions with both the Professional Advisor and Faculty Mentor.

\_\_\_\_\_ Other (Specify):

**To the Student:** As they review your F-1 Professional Goal and Action Plan (PGAP), your Faculty Mentor and Professional Advisor will take into account the assessment criteria listed below.

If you are completing this plan after your Foundations course has ended, check here: \_\_\_ and send this completed form to your Faculty Mentor. After review and signature, your Faculty Mentor should email it as an attachment to [SCPSassessment@depaul.edu](mailto:SCPSassessment@depaul.edu). If you are completing this plan during your Foundations course, print it and give it to your Mentor.

Before you submit your plan, use the criteria below to assess the completeness and appropriateness of your plan.

Criteria for assessing F1:	Faculty Mentor	Professional Advisor
1. The goal is appropriate for college-level work in a bachelor's program.		
2. The evidence articulates realistic and attainable goals.		
3. The student articulates well the roles and responsibilities of the career, vocation, focus area, or job the student expects to have in the future.		
4. The student understands the knowledge, skills, and attributes necessary for carrying out the work the student expects to do in the future.		
5. The student evaluates and articulates his/her own current level of knowledge, skills, attributes, education, and experience related to the goals the student hopes to attain.		
6. The student articulates a sound plan for attaining her or his goals that includes an understanding of the negative forces that might impede her or him from attaining the goal as well as the positive forces and resources that will help her/him fulfill the goal.		
7. The student has consulted an appropriate range of resources (e.g. student has spoken to experts in the field he or she is interested in pursuing, read articles or books, and/or has researched graduate programs [for those who intend to go to graduate school]).		
8. The student demonstrates an understanding of the changes affecting her/his focus area, and what she/he might need to do to prepare for these changes.		
9. The student articulates the relationship between her/his Professional Goals and Focus Area design.		
10. An annotated bibliography is included (at least 8 references)		

**Assessment Recommendations:**

Approved as written                       Minor Revisions (indicated below)  
 Other (indicate below)                       Addendum (indicate below)  
 Major Revisions (indicated below)

**General comments and/or specific suggestions for revisions**

PLEASE SUBMIT THIS FORM BY EMAIL. SUBMISSION FROM MENTOR FACULTY EMAIL ACCOUNT CONSTITUTES VERIFICATION OF APPROVAL.

\_\_\_\_\_

Faculty Mentor's Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Professional Advisor's Signature

\_\_\_\_\_

Date