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| **PRELIMINARY REPORT OF THE REAFFIRMATION COMMITTEE**  (Updated January 2024) |

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| **Statement Regarding the Report**  *The Board of Trustees of the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) is responsible for making the final determination on reaffirmation of accreditation based on the findings contained in this committee report, the institution’s response to issues contained in the report, other assessments relevant to the review, and application of SACSCOC policies and procedures. Final interpretation of the* Principles of Accreditation *and final action on the accreditation status of the institution rest with SACSCOC Board of Trustees.* |

**Name of the Institution:**

**Date of the Review:**

**SACSCOC Staff Member**:

**Chair of the Committee *(name, title, institution, city and state)***:

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| **Part I. Overview and Introduction to the Institution** |

*The report from the Off-Site Reaffirmation Committee represents the preliminary conclusions of the Committee based on the application of the Principles of Accreditation to information provided by the institution in its completed Compliance Certification. This report is forwarded to the institution and the On-Site Reaffirmation Committee. The institution will have an opportunity to respond to the Off-Site Reaffirmation Committee’s findings in a Focused Report that also will be sent to the members of the On-Site Reaffirmation Committee. The On-Site Reaffirmation Committee will conduct interviews, review on-site documents, update the preliminary report as appropriate, and approve a final Report of the Reaffirmation Committee. The Report and the institution’s response are forwarded to the Commission’s Board of Trustees for final action on reaffirmation of accreditation.*

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| Part II. Assessment of Compliance |

*Sections 1-14 to be completed by the Off-Site Reaffirmation Committee and the On-Site Reaffirmation Committee. Standards 1.1, 2.1, 3.1, 4.1, 5.1, 6.1, 7.1, 8.1, 9.1, 9.2, 9.3, 11.1, 12.1, 13.1, and 13.2 are Core Requirements; they are formatted in Bold.*

**Section 1: The Principle of Integrity**

1.1 **The institution operates with integrity in all matters.**

*(Integrity)* **[CR; Off-Site/On-Site Review]**

*(Note: This principle is not addressed by the institution in its Compliance Certification.)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 2: Mission**

2.1 **The institution has a clearly defined, comprehensive, and published mission specific to the institution and appropriate for higher education. The mission addresses teaching and learning and, where applicable, research and public service.**

*(Institutional mission)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 3: Basic Eligibility Standard**

3.1 **An institution seeking to gain or maintain accredited status**

[Note: A member institution is not required to provide a comprehensive narrative and supporting documentation for the standards in Section 3 unless something has changed since its last comprehensive review. Institutions should, however, affirm in writing that no changes have occurred that would warrant providing a response to these standards.]

3.1.a **has degree-granting authority from the appropriate government agency or agencies.**

*(Degree-granting authority)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

3.1.b **offers all course work required for at least one degree program at each level at which it awards degrees.** (For exceptions, see SACSCOC policy “Documenting an Alternative Approach.”)

*(Course work for degrees)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

3.1.c **is in operation and has students enrolled in degree programs.**

*(Continuous operation)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 4: Governing Board**

4.1 **The institution has a governing board of at least five members that:**

(a) **is the legal body with specific authority over the institution.**

(b) **exercises fiduciary oversight of the institution.**

(c) **ensures that both the presiding officer of the board and a majority of other voting members of the board are free of any contractual, employment, personal, or familial financial interest in the institution.**

(d) **is not controlled by a minority of board members or by organizations or institutions separate from it.**

(e) **is not presided over by the chief executive officer of the institution.**

*(Governing board characteristics)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2 The governing board

4.2.a ensures the regular review of the institution’s mission.

*(Mission review)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2.b ensures a clear and appropriate distinction between the policy-making function of the board and the respective responsibilities of the administration and faculty to administer and implement policy.

*(Board/administrative distinction and shared governance)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2.c selects and regularly evaluates the institution’s chief executive officer.

*(CEO evaluation/selection)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2.d defines and addresses potential conflict of interest for its members.

*(Conflict of interest)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2.e has appropriate and fair processes for the dismissal of a board member.

*(Board dismissal)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2.f protects the institution from undue influence by external persons or bodies.

*(External influence)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.2.g defines its responsibilities and regularly evaluates its effectiveness.

*(Board self-evaluation)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

4.3 If an institution’s governing board does not retain sole legal authority and operating control in a multiple-level governance system, then the institution clearly defines that authority and control for the following areas within its governance structure: (a) institution’s mission, (b) fiscal stability of the institution, and (c) institutional policy.

*(Multi-level governance)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 5: Administration and Organization**

5.1 **The institution has a chief executive officer whose primary responsibility is to the institution.**

*(Chief executive officer)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

5.2 The chief executive officer has ultimate responsibility for, and exercises appropriate control over, the following:

5.2.a The institution’s educational, administrative, and fiscal programs and services.

*(CEO control)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

5.2.b The institution’s intercollegiate athletics program.

*(Control of intercollegiate athletics)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

5.2.c The institution’s fund-raising activities.

*(Control of fund-raising activities)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

5.3 For any entity organized separately from the institution and formed primarily for the purpose of supporting the institution or its programs:

(a) The legal authority and operating control of the institution is clearly defined with respect to that entity.

(b) The relationship of that entity to the institution and the extent of any liability arising from that relationship are clearly described in a formal, written manner.

(c) The institution demonstrates that (1) the chief executive officer controls any fund-raising activities of that entity or (2) the fund-raising activities of that entity are defined in a formal, written manner that assures those activities further the mission of the institution.

*(Institution-related entities)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

5.4 The institution employs and regularly evaluates administrative and academic officers with appropriate experience and qualifications to lead the institution.

*(Qualified administrative/academic officers)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

5.5 The institution publishes and implements policies regarding the appointment, employment, and regular evaluation of non-faculty personnel.

*(Personnel appointment and evaluation)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 6: Faculty**

6.1 **The institution employs a sufficient number of full-time faculty members to support the mission and goals of the institution.**

*(Full-time faculty)* **[CR; Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

6.2 For each of its educational programs, the institution

6.2.a Justifies and documents the qualifications of its faculty members.

*(Faculty qualifications)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

6.2.b Employs a sufficient number of full-time faculty members to ensure curriculum and program quality, integrity, and review.

*(Program faculty)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

6.2.c Assigns appropriate responsibility for program coordination.

*(Program coordination)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

6.3 The institution publishes and implements policies regarding the appointment, employment, and regular evaluation of faculty members, regardless of contract or tenure status.

*(Faculty employment and evaluation)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

6.4 The institution publishes and implements appropriate policies and procedures for preserving and protecting academic freedom.

*(Academic freedom)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

6.5 The institution provides ongoing professional development opportunities for faculty members as teachers, scholars, and practitioners, consistent with the institutional mission.

*(Faculty development)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 7: Institutional Planning and Effectiveness**

7.1 **The institution engages in ongoing, comprehensive, and integrated research-based planning and evaluation processes that (a) focus on institutional quality and effectiveness and (b) incorporate a systematic review of institutional goals and outcomes consistent with its mission.**

*(Institutional planning)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

7.2 The institution has a QEP that (a) has a topic identified through its ongoing, comprehensive planning and evaluation processes; (b) has broad-based support of institutional constituencies; (c) focuses on improving specific student learning outcomes and/or student success; (d) commits resources to initiate, implement, and complete the QEP; and (e) includes a plan to assess achievement.

*(Quality Enhancement Plan)*

Comment:

7.3 The institution identifies expected outcomes of its administrative support services and demonstrates the extent to which the outcomes are achieved.

*(Administrative effectiveness)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 8: Student Achievement**

8.1 **The institution identifies, evaluates, and publishes goals and outcomes for student achievement appropriate to the institution’s mission, the nature of the students it serves, and the kinds of programs offered. The institution uses multiple measures to document student success.**

*(Student achievement)* **[CR; Off-Site/On-Site Review]**

[Note: Each member institution has chosen a specific metric with SACSCOC for measuring graduation rate and analyzing that measure of student success. As part of its response to this standard, the institution should identify its chosen metric; provide appropriate data regarding its performance as measured by that metric (including its baseline data, goals, and outcomes); and discuss any changes it has made based on its analysis of this graduation-rate data. Institutions are also required to disaggregate their graduation data in appropriate ways; they should discuss that disaggregated data and any changes made as a result of analyzing that data.]

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

8.2 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of seeking improvement based on analysis of the results in the areas below:

8.2.a Student learning outcomes for each of its educational programs.

*(Student outcomes: educational programs)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

8.2.b Student learning outcomes for collegiate-level general education competencies of its undergraduate degree programs.

*(Student outcomes: general education)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

8.2.c Academic and student services that support student success.

*(Student outcomes: academic and student services)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 9: Educational Program Structure and Content**

9.1 **Educational programs (a) embody a coherent course of study, (b) are compatible with the stated mission and goals of the institution, and (c) are based on fields of study appropriate to higher education.**

*(Program content)* **[CR; Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

9.2 **The institution offers one or more degree programs based on at least 60 semester credit hours or the equivalent at the associate level; at least 120 semester credit hours or the equivalent at the baccalaureate level; or at least 30 semester credit hours or the equivalent at the post-baccalaureate, graduate, or professional level. The institution provides an explanation of equivalencies when using units other than semester credit hours. The institution provides an appropriate justification for all degree programs and combined degree programs that include fewer than the required number of semester credit hours or its equivalent unit.**

*(Program Length)* **[CR; Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

9.3 **The institution requires a general education component at the undergraduate level that:**

(a) **is based on a coherent rationale.**

(b) **is a substantial component of each undergraduate degree program. For degree completion in associate programs, the component constitutes a minimum of 15 semester hours or the equivalent; for baccalaureate programs, a minimum of 30 semester hours or the equivalent.**

(c) **ensures breadth of knowledge. These credit hours include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics. These courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession.**

*(General education requirements* **[CR; Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

9.4 At least 25 percent of the credit hours required for an undergraduate degree are earned through instruction offered by the institution awarding the degree.

*(Institutional credits for an undergraduate degree)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

9.5 At least one-third of the credit hours required for a graduate or a post-baccalaureate professional degree are earned through instruction offered by the institution awarding the degree.

*(Institutional credits for a graduate/professional degree)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

9.6 Post-baccalaureate professional degree programs and graduate degree programs are progressively more advanced in academic content than undergraduate programs, and are structured (a) to include knowledge of the literature of the discipline and (b) to ensure engagement in research and/or appropriate professional practice and training.

*(Post-baccalaureate rigor and curriculum)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

9.7 The institution publishes requirements for its undergraduate, graduate, and post-baccalaureate professional programs, as applicable. The requirements conform to commonly accepted standards and practices for degree programs.

*(Program requirements)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 10: Educational Policies, Procedures, and Practices**

10.1 The institution publishes, implements, and disseminates academic policies that adhere to principles of good educational practice and that accurately represent the programs and services of the institution.

*(Academic policies)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.2 The institution makes available to students and the public current academic calendars, grading policies, cost of attendance, and refund policies.

*(Public information)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.3 The institution ensures the availability of archived official catalogs (digital or print) with relevant information for course and degree requirements sufficient to serve former and returning students.

*(Archived information)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.4 The institution (a) publishes and implements policies on the authority of faculty in academic and governance matters, (b) demonstrates that educational programs for which academic credit is awarded are approved consistent with institutional policy, and (c) places primary responsibility for the content, quality, and effectiveness of the curriculum with its faculty.

*(Academic governance)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.5 The institution: (a) publishes admissions policies consistent with its mission; (b) ensures that its recruitment materials and presentations accurately represent the institution’s practices, policies, and accreditation status; and (c) ensures that independent contractors or agents used for recruiting purposes and for admission activities are governed by the same principles and policies as institutional employees.

*(Admissions policies and practices)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.6 An institution that offers distance or correspondence education:

(a) ensures that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit.

(b) has a written procedure for protecting the privacy of students enrolled in distance and correspondence education courses or programs.

(c) ensures that students are notified, in writing at the time of registration or enrollment, of any projected additional student charges associated with verification of student identity.

*(Distance and correspondence education)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.7 The institution publishes and implements policies for determining the amount and level of credit awarded for its courses, regardless of format or mode of delivery. These policies require oversight by persons academically qualified to make the necessary judgments. In educational programs not based on credit hours (e.g., direct assessment programs), the institution has a sound means for determining credit equivalencies.

*(Policies for awarding credit)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.8 The institution publishes policies for evaluating, awarding, and accepting credit not originating from the institution. The institution ensures (a) the academic quality of any credit or coursework recorded on its transcript, (b) an approval process with oversight by persons academically qualified to make the necessary judgments, and (c) the credit awarded is comparable to a designated credit experience and is consistent with the institution’s mission.

*(Evaluating and awarding external academic credit)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

10.9 The institution ensures the quality and integrity of the work recorded when an institution transcripts courses or credits as its own when offered through a cooperative academic arrangement. The institution maintains formal agreements between the parties involved, and the institution regularly evaluates such agreements.

*(Cooperative academic arrangements)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 11: Library and Learning/Information Resources**

11.1 **The institution provides adequate and appropriate library and learning/information resources, services, and support for its mission.**

*(Library and learning/information resources)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

11.2 The institution ensures an adequate number of professional and other staff with appropriate education or experiences in library and/or other learning/information resources to accomplish the mission of the institution.

*(Library and learning/information staff)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

11.3 The institution provides (a) student and faculty access and user privileges to its library services and (b) access to regular and timely instruction in the use of the library and other learning/information resources.

*(Library and learning/information access)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 12: Academic and Student Support Services**

12.1 **The institution provides appropriate academic and student support programs, services, and activities consistent with its mission.**

*(Student support services)* **[CR Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

12.2 The institution ensures an adequate number of academic and student support services staff with appropriate education or experience in student support service areas to accomplish the mission of the institution.

*(Student support services staff)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

12.3 The institution publishes clear and appropriate statement(s) of student rights and responsibilities and disseminates the statement(s) to the campus community.

*(Student rights)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

12.4 The institution (a) publishes appropriate and clear procedures for addressing written student complaints, (b) demonstrates that it follows the procedures when resolving them, and (c) maintains a record of student complaints that can be accessed upon request by SACSCOC.

*(Student complaints)* **[Off-Site/On-Site Review]**

[Note: As part of its response to this standard, the institution should include information about the individual(s)/office(s) responsible for maintaining these records, elements of a complaint review that are included in the record(s), and whether the records are centralized or decentralized.]

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

12.5 The institution protects the security, confidentiality, and integrity of its student records and maintains security measures to protect and back up data. The institution also ensures that independent contractors or agents that have access to or maintain student records are governed by the same principles and policies as institutional employees.

*(Student records)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

12.6 The institution provides information and guidance to help student borrowers understand how to manage their debt and repay their loans.

*(Student debt and financial literacy)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 13: Financial and Physical Resources**

13.1 **The institution has sound financial resources and a demonstrated, stable financial base to support the mission of the institution and the scope of its programs and services.**

*(Financial resources)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.2 **The member institution provides the following financial statements:**

(a) **an institutional audit (orStandard Review Reportissued in accordance with *Statements on Standards for Accounting and Review Services* issued by the AICPA for those institutions audited as part of a system-wide or statewide audit) for the most recent fiscal year prepared by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or Standard Review Report) guide.**

(b) **a statement of financial position of unrestricted net assets (without donor restrictions), exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year.**

(c) **an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board.**

*(Financial documents)* **[CR]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.3 The institution manages its financial resources and operates in a fiscally responsible manner.

*(Financial responsibility)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.4 The institution exercises appropriate control over all its financial resources.

*(Control of finances)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.5 The institution maintains financial control over externally funded or sponsored research and programs.

*(Control of sponsored research/external funds)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.6 The institution (a) is in compliance with its program responsibilities under Title IV of the most recent Higher Education Act as amended and (b) audits financial aid programs as required by federal and state regulations. In reviewing the institution’s compliance with these program responsibilities under Title IV, SACSCOC relies on documentation forwarded to it by the U. S. Department of Education.

*(Federal and state responsibilities)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.7 The institution ensures adequate physical facilities and resources, both on and off campus, that appropriately serve the needs of the institution’s educational programs, support services, and other mission-related activities.

*(Physical resources)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

13.8 The institution takes reasonable steps to provide a healthy, safe, and secure environment for all members of the campus community.

*(Institutional environment)*

[Note: An institution should also include information about the status of any open or closed investigations by the U.S. Department of Education’s Office of Civil Rights related to sexual violence that were active at the time of, or have occurred since, the institution’s last comprehensive review. If there have been no such investigations, the institution should indicate as much.]

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Section 14: Transparency and Institutional Representation**

14.1 The institution (a) accurately represents its accreditation status and publishes the name, address, telephone number, and website address of SACSCOC in accordance with SACSCOC’s requirements and federal policy; and (b) ensures all its branch campuses include the name of that institution and make it clear that their accreditation depends on the continued accreditation of the parent campus.

*(Publication of accreditation status)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

14.2 The institution has a policy and procedure to ensure that all substantive changes are reported in accordance with SACSCOC’s policy.

*(Substantive change)*

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

14.3 The institution applies all appropriate standards and policies to its distance learning programs, branch campuses, and off-campus instructional sites.

*(Comprehensive institutional reviews)* **[Off-Site/On-Site Review]**

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

14.4 The institution (a) represents itself accurately to all U.S. Department of Education recognized accrediting agencies with which it holds accreditation and (b) informs those agencies of any change of accreditation status, including the imposition of public sanctions. (See SACSCOC policy “Accrediting Decisions of Other Agencies.”)

*(Representation to other agencies)* **[Off-Site/On-Site Review]**

[Note: Institutions responding to part (a) of this standard should provide evidence (e.g., appropriate portion of the most recent self-study, report from the other accreditor, etc.) that demonstrates the accurate representation to other USDE recognized agencies regarding such things as institutional purpose, governance, programs, and finances.]

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

14.5 The institution complies with SACSCOC’s policy statements that pertain to new or additional institutional obligations that may arise that are not part of the standards in the current *Principles of Accreditation*.

*(Policy compliance)*

*(Note: For applicable policies, institutions should refer to the SACSCOC website [http:/www.sacscoc.org])*

[Note: Committees must make a single determination of compliance for this standard.]

14.5.a **“Reaffirmation of Accreditation and Subsequent Reports”**

**Applicable Policy Statement.** If an institution is part of a system or corporate structure, a description of the system operation (or corporate structure) is submitted as part of the Compliance Certification for the decennial review. The description should be designed to help members of the peer review committees understand the mission, governance, and operating procedures of the system and the individual institution’s role within that system.

**Documentation**: The institution should provide a description of the system operation and structure or the corporate structure if this applies.

(*Policy compliance: “Reaffirmation of Accreditation and Subsequent Reports”*)

14.5.b **“Separate Accreditation for Units of a Member Institution”**

**Applicable Policy Statement**. If the Commission on Colleges determines that an extended unit is autonomous to the extent that the control over that unit by the parent or its board is significantly impaired, the Commission may direct that the extended unit seek to become a separately accredited institution. A unit which seeks separate accreditation should bear a different name from that of the parent. If the Southern Association of Colleges and Schools Commission on Colleges determines the unit should be separately accredited or the institution requests to be separately accredited, the unit may apply for separate accreditation from any institutional accrediting association that accredits colleges in that state or country.

**Implementation**: If, during its review of the institution, SACSCOC determines that an extended unit is sufficiently autonomous to the extent that the parent campus has little or no control, SACSCOC will use this policy to recommend separate accreditation of the extended unit. No response is required by the institution.

(*Policy compliance: “Separate Accreditation for Units of a Member Institution”*)

\_\_\_ Compliance

\_\_\_ Non-Compliance

Comment:

**Comments section (optional)**

This section is reserved for committees to provide comments that are not compliance-related but would be helpful feedback for the institution. Any comments placed in this section should not be construed as directives to the institution.

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| **Part III. Assessment of the Quality Enhancement Plan** |

*To be completed by the On-Site Reaffirmation Committee.*

**Brief description of the institution’s Quality Enhancement Plan**

**Analysis of the Quality Enhancement Plan**

A. ***Topic Identification****. The institution has a topic identified through its ongoing, comprehensive planning and evaluation processes.*

B. ***Broad-based Support.*** *The plan has the broad-based support of institutional constituencies*.

C. ***Focus of the Plan***. *The institution identifies a significant issue that focuses on improving specific student learning outcomes and/or student success*.

D. ***Institutional Capability for the Initiation, Implementation, and Completion of the Plan***. *The institution provides evidence that it has committed sufficient resources to initiate, implement, and complete the QEP.*

E. ***Assessment of the Plan***. *The institution has developed an appropriate plan to assess achievement.*

**Analysis and Comments for Strengthening the QEP**

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| **Part IV. Third-Party Comments** |

*To be completed by the On-Site Reaffirmation Committee.*

If an institution receives Third-Party Comments, the institution has an opportunity to respond to those comments and the On-Site Reaffirmation Committee reviews the response as part of its comprehensive evaluation of the institution.

The Committee should check one of the following:

\_\_\_\_ No Third-Party Comments submitted.

\_\_\_\_ Third-Party Comments submitted. ***(Address the items below.)***

*1. Describe the nature of the Comments and any allegations of non-compliance that may have been part of the formal Third-Party Comments.*

*2. Indicate whether the Committee found evidence in support of any allegations of non-compliance.*

*If found to be out of compliance, the Committee should write a recommendation and include it in Part II under the standard cited with a full narrative that describes why the institution was found to be out of compliance and the documentation that supports that determination. In this space, reference the number of the Core Requirement, Comprehensive Standard, or Federal Requirement and the recommendation number cited in Part II.*

*If determined to be in compliance, explain in this space the reasons and refer to the documentation in support of this finding.*

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| **APPENDIX A** | |
| **Roster of the Off-Site Reaffirmation Committee** | **Roster of the On-Site Reaffirmation Committee** |

*(Refer to “Directions for Completion of the Report of the Reaffirmation Committee.”)*

**APPENDIX B**

**Off-Campus Sites or Distance Learning Programs Reviewed**

*(Refer to “Directions for Completion of the Report of the Reaffirmation Committee.”)*

**APPENDIX C**

**List of Recommendations**

**Cited in the Report of the Reaffirmation Committee**

*(Refer to “Directions for Completion of the Report of the Reaffirmation Committee.”)*