

Request for a Period of Noncompliance	TODAY'S DATE
INSTITUTION NAME	MAIN CAMPUS CITY + STATE (OR NON-U.S. COUNTRY)

Instructions for institution:

1. Requests are subject to approval by the SACSCOC Board of Trustees or the SACSCOC Executive Council, acting on the Board's behalf.
2. Circumstances that may merit consideration of a request for an exemption are described in: [Requests for a Period of Noncompliance](#)
3. Complete all fields; additional or supporting documentation is not needed and is not accepted.
4. Submit this completed form to SACSCOC; do not submit a print or scan of this form.
5. To submit this form, email it as an attachment to: bwheelan@sacscoc.org

Q1: WHAT IS THE REASON FOR THE REQUEST FOR A PERIOD OF NONCOMPLIANCE?
(1500 CHARACTER LIMIT)

Q2: PLEASE PROVIDE A LISTING OF THE SPECIFIC STANDARD(S) AND THE TIMEFRAME FOR NONCOMPLIANCE REQUESTED.
(1500 CHARACTER LIMIT)

Q3: WHAT IS THE INSTITUTION'S PLAN FOR RETURNING TO COMPLIANCE?
(1500 CHARACTER LIMIT)

PROPOSED DATES OF NONCOMPLIANCE	LIAISON NAME	SACSCOC OFFICE USE ONLY	
	LIAISON EMAIL ADDRESS		
↓ SACSCOC OFFICE USE ONLY ↓			
CASE ID IF APPROVED FEBRUARY 2022 OR LATER EC	APPROVAL DATE (LETTER DATE)	APPROVED DATES OF NONCOMPLIANCE	DESCRIPTION OF APPROVED EXEMPTION
↑ SACSCOC OFFICE USE ONLY ↑			