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| **COMPLIANCE CERTIFICATION****FOR****DIFFERENTIATED REVIEW****(Updated January 2024)** |

**Name of Institution**

**Date of Submission**

To be accredited by SACSCOC, an institution is required to conduct a comprehensive compliance audit prior to the filing of the Compliance Certification. The comprehensive compliance audit includes an assessment of all programs and courses offered by the institution on-campus and off-campus, and those offered through distance learning. The Compliance Certification, signed by the institution’s chief executive officer and accreditation liaison, attests to the institution’s honest assessment of compliance with the accreditation requirements of SACSCOC (including all Standards in the *Principles of Accreditation*) as applied to all aspects of the institution.

**Completion of the Compliance Certification**

The Compliance Certification consists of four parts:

**Part 1** Signature Page for the institution’s chief executive officer and the accreditation liaison

**Part 2** List of all substantive changes that have been reported and approved by SACSCOC since the institution’s last reaffirmation as well as the date of approval

**Part 3** The institution’s assessment of compliance with the *Principles of Accreditation*

**Part 4** An attached and updated “Institutional Summary Form Prepared for SACSCOC Reviews” that (a) lists all locations where coursework toward a degree, certificate, or diploma can be obtained primarily through traditional classroom instruction and (b) describes distance education credit offerings that can be obtained primarily through electronic means.

For each Part, please follow the directions provided. For Part 2 above, if there have been no institutional changes that required reporting or approval since the institution’s last comprehensive review, please indicates it as well.

**Part 1. SIGNATURES ATTESTING TO COMPLIANCE**

By signing below, we attest to the following:

1. That \_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of institution)* has conducted an honest assessment of compliance and has provided complete and accurate disclosure of timely information regarding compliance with the Standards contained in the *Principles of Accreditation*.
2. That \_\_\_\_\_\_\_\_\_\_\_\_\_ *(name of institution)* has attached a complete and accurate listing of all programs offered by the institution, the locations where they are offered, and the means by which they are offered as indicated on the updated “Institutional Summary Form Prepared for SACSCOC Reviews,” and that the comprehensive assessment of compliance reported on the Compliance Certification includes the review of all such programs.
3. That \_\_\_\_\_\_\_\_\_\_\_\_ *(name of institution*) has provided a complete and accurate listing of all substantive changes that have been reported and approved by the Commission since the institution’s last reaffirmation as well as the date of Commission approval.

 **Accreditation Liaison**

**Name of Accreditation Liaison**

**Signature**

**Date**

 **Chief Executive Officer**

**Name of Chief Executive Officer**

**Signature**

**Date**

**Part 2. LIST OF SUBSTANTIVE CHANGES APPROVED**

 ***SINCE THE LAST REAFFIRMATION***

**Directions:** For each substantive change approved since the institution’s initial accreditation or last reaffirmation review, briefly describe the change and provide the date of SACSCOC approval. If no substantive changes requiring approval have been submitted since the last comprehensive review, write “none” in the first column. If, in the review of substantive change, the institution discovers substantive changes that have not been reported according to Commission policy, the changes should be reported ***immediately*** to SACSCOC staff.

Substantive changes requiring approval:

* Any change in the established mission or objectives of the institution
* Any change in legal status, form of control, or ownership of the institution
* The addition of courses or programs that represent a significant departure, either in content or method of delivery, from those that were offered when the institution was last evaluated
* The addition of courses or programs of study at a degree or credential level different from that which is included in the institution’s current accreditation or reaffirmation.
* A change from clock hours to credit hours
* A substantial increase in the number of clock or credit hours awarded for successful completion of a program
* The establishment of an additional location geographically apart from the main campus at which the institution offers at least 50 percent of an educational program.
* The establishment of a branch campus
* Closing a program, off-campus site, branch campus or institution
* Entering into a collaborative academic arrangement such as a dual degree program or a joint degree program with another institution
* Acquiring another institution or a program or location of another institution
* Adding a permanent location at a site where the institution is conducting a teach-out program for a closed institution
* Entering into a contract by which an entity not eligible for Title IV funding offers 25 percent or more of one or more of the accredited institution’s programs

Refer to SACSCOC’s policy [*Substantive Change Policy and Procedures*](http://sacscoc.org/app/uploads/2019/08/SubstantiveChange.pdf) for additional information on reporting substantive change, including examples of the changes listed above.

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| **Approval Date** | **Description of Substantive Change** |
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**Part 3. INSTITUTIONAL ASSESSMENT OF COMPLIANCE**

**Directions:**  For each of the Core Requirements and Standards listed below, the institution should place an “X” before the judgment of compliance and then add narrative in support of its judgment in accordance with directions requested in the category description.

**Compliance** The institution meets the requirement and provides a convincing argument in support of its determination and provides documents or a sampling of documents (or electronic access to the documents) demonstrating compliance.

**Partial Compliance** The institution meets some, but not all, aspects of the requirement. For those aspects meeting the requirement, the institution provides a convincing argument in support of its determination and provides a list of documents or sampling of documents (or electronic access to the documents) demonstrating compliance. For those aspects not meeting the requirement, the institution provides the reason for checking partial compliance, a description of plans to comply, and a list of documents that will be used to demonstrate future compliance.

**Non-Compliance** The institution does not meet the requirement and provides the reason for checking non-compliance, a description of plans to comply, and a list of documents that will be used to demonstrate future compliance.

**Note 1:** *Several of the standards/requirements require that an institution provide a policy. When developing policies and procedures addressing the requirement outlined in a standard, an institution may want to refer to a best practice statement approved by the SACSCOC Board of Trustees that outlines criteria for a functional policy and procedures for implementation*. See “[Developing Policy and Procedure Documents](http://sacscoc.org/app/uploads/2019/08/best-practices-for-policy-development-final.pdf).” In addition, those standards which require an institutional policy also require that the institution demonstrate that such policies are appropriately approved, published, and implemented. Institutions which have not had cause to implement a policy (e.g., dismissing a board member) should affirm so in their narrative for the standard.

**Note 2: *Core Requirements are printed in bold and marked as [CR].*** *All standards marked with [Off-Site/On-Site Review] will be reviewed by both the Off-Site Reaffirmation Committee and the On-Site Reaffirmation Committee regardless of the judgment rendered at the time of the off-site review.*

**Section 1: The Principle of Integrity**

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| 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.]*Narrative: |

**Section 2: Mission**

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| 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 \_\_\_ Partial ComplianceNarrative: |

**Section 4: Governing Board**

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 4.2 The governing board |
| 4.2.d defines and addresses potential conflict of interest for its members. *(Conflict of interest)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |
| 4.2.f protects the institution from undue influence by external persons or bodies. *(External influence)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |
| 4.2.g defines its responsibilities and regularly evaluates its effectiveness. *(Board self-evaluation)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

**Section 5: Administration and Organization**

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| 5.1 **The institution has a chief executive officer whose primary responsibility is to the institution.** (For exceptions, see SACSCOC policy [*Core Requirement 5.1: Documenting an Alternative Approach*](http://sacscoc.org/app/uploads/2019/07/core-requirement-5.1.pdf).) *(Chief executive officer)* **[CR]**\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |
| 5.2.b The institution’s intercollegiate athletics program. *(Control of intercollegiate athletics)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |
| 5.2.c The institution’s fund-raising activities. *(Control of fund-raising activities)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

**Section 6: Faculty**

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |
| 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 \_\_\_ Partial ComplianceNarrative: |
| 6.2.c Assigns appropriate responsibility for program coordination.  *(Program coordination)* **[Off-Site/On-Site Review]**\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

**Section 7: Institutional Planning and Effectiveness**

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

**Section 8: Student Achievement**

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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

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| 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 \_\_\_ Partial ComplianceNarrative: |

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

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

**Section 13: Financial and Physical Resources**

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 AICPAfor 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 \_\_\_ Partial ComplianceNarrat ive: |

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| 13.3 The institution manages its financial resources and operates in a fiscally responsible manner. *(Financial responsibility)*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

**Section 14: Transparency and Institutional Representation**

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| 14.1 The institution (a) accurately represents its accreditation status and publishes the name, address, telephone number, and website 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 \_\_\_ Partial ComplianceNarrative: |

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| 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 \_\_\_ Partial ComplianceNarrative: |

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| 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*](http://sacscoc.org/app/uploads/2019/07/AccredDecisionsOthers.pdf).)*(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 U.S. DOE recognized agencies with regard to such things as institutional purpose, governance, programs, and finances.]*\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |

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| 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)*. A single assessment of compliance is needed 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 with in that system.**Documentation**: The institution should provide a description of the system operation and structure or the corporate structure if this applies.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.\_\_\_ Compliance \_\_\_ Non-Compliance \_\_\_ Partial ComplianceNarrative: |