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2014 Eligibility Requirements for Accreditation
Eligibility Requirements for Accreditation

(Adopted June 2014)

Introduction

Eligible institutions offering one or more programs leading to the Associate Degree, located in the states of Hawai‘i and California, the territories of Guam and American Samoa, the Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, the Republic of Palau, and the Republic of the Marshall Islands may apply to the Commission for candidacy. Eligible institutions may offer, in addition to the Associate Degree, other credentials including certificates and the baccalaureate degree.

Prior to making a formal application, an institution wishing to become a Candidate for Accreditation must begin by assessing itself in relation to the basic criteria for institutional eligibility, stated below. The institution should also review the Accreditation Standards and Commission policies, as they will provide a clear statement of ultimate Commission expectations of institutional performance and quality and give further definition to the eligibility criteria. The eligibility process is designed to screen institutions prior to a period of formal and extensive institutional self evaluation so that only institutions which meet the basic criteria for eligibility may proceed.

The Commission uses the same institutional self evaluation and site visit process for both candidacy and accreditation applications. The history of an applicant institution will also bear on the Commission’s decision. The outcome of a candidacy (pre-accreditation) or an initial accreditation review is candidacy, accreditation, or denial. When appropriate, the Commission may defer its decision on candidacy or initial accreditation pending receipt of specified information.

Eligibility Requirements

In order to achieve eligibility, the institution must completely meet all Eligibility Requirements. Compliance with the Eligibility Requirements is expected to be continuous and will be validated periodically, normally as part of every Institutional Self Evaluation process and external Educational Quality and Institutional Effectiveness Review.

Institutions that have achieved accreditation are expected to include in their Institutional Self Evaluation Report information demonstrating that they continue to meet the eligibility requirements. Accredited institutions must separately address Eligibility Requirements 1, 2, 3, 4, and 5 in the Institutional Self Evaluation Report. The remaining Eligibility Requirements will be addressed in the institution’s response to the relevant sections of the Accreditation Standards.
1. **Authority**
   The institution is authorized or licensed to operate as a post-secondary educational institution and to award degrees by an appropriate governmental organization or agency as required by each of the jurisdictions or regions in which it operates.

Private institutions, if required by the appropriate statutory regulatory body, must submit evidence of authorization, licensure, or approval by that body. If incorporated, the institution shall submit a copy of its articles of incorporation.

2. **Operational Status**
The institution is operational, with students actively pursuing its degree programs.

3. **Degrees**
   A substantial portion of the institution's educational offerings are programs that lead to degrees, and a significant proportion of its students are enrolled in them. At least one degree program must be of two academic years in length.

4. **Chief Executive Officer**
The institution has a chief executive officer appointed by the governing board, whose full-time responsibility is to the institution, and who possesses the requisite authority to administer board policies. Neither the district/system chief executive officer nor the institutional chief executive officer may serve as the chair of the governing board. The institution informs the Commission immediately when there is a change in the institutional chief executive officer.

5. **Financial Accountability**
The institution annually undergoes and makes available an external financial audit by a certified public accountant or an audit by an appropriate public agency. Institutions that are already Title IV eligible must demonstrate compliance with federal requirements.

**Additional financial accountability for eligibility applicants:** The institution shall submit with its eligibility application a copy of the budget and institutional financial audits and management letters prepared by an outside certified public accountant or by an appropriate public agency, who has no other relationship to the institution, for its two most recent fiscal years, including the fiscal year ending immediately prior to the date of the submission of the application. The audits must be certified and any exceptions explained. It is recommended that the auditor employ as a guide *Audits of Colleges and Universities*, published by the American Institute of Certified Public Accountants. An applicant institution must not show an annual or cumulative operating deficit at any time during the eligibility application process.

6. **Mission**
The institution's educational mission is clearly defined, adopted, and published by its governing board consistent with its legal authorization, and is appropriate to a degree-
granting institution of higher education and the constituency it seeks to serve. The mission statement defines institutional commitment to student learning and achievement. (Standard I.A.1 and I.A.4)

7. **Governing Board**
   The institution has a functioning governing board responsible for the academic quality, institutional integrity, and financial stability of the institution and for ensuring that the institution’s mission is achieved. This board is ultimately responsible for ensuring that the financial resources of the institution are used to provide a sound educational program. Its membership is sufficient in size and composition to fulfill all board responsibilities.

   The governing board is an independent policy-making body capable of reflecting constituent and public interest in board activities and decisions. A majority of the board members have no employment, family, ownership, or other personal financial interest in the institution. The board adheres to a conflict of interest policy that assures that those interests are disclosed and that they do not interfere with the impartiality of governing body members or outweigh the greater duty to secure and ensure the academic and fiscal integrity of the institution. (Standard IV.C.1, IV.C.4, and IV.C.11)

8. **Administrative Capacity**
   The institution has sufficient staff, with appropriate preparation and experience to provide the administrative services necessary to support its mission and purpose. (Standard III.A.9 and III.A.10)

9. **Educational Programs**
   The institution’s principal degree programs are congruent with its mission, are based on recognized higher education field(s) of study, are of sufficient content and length, are conducted at levels of quality and rigor appropriate to the degrees offered, and culminate in identified student outcomes. (Standard II.A.1 and II.A.6)

10. **Academic Credit**
    The institution awards academic credits based on generally accepted practices for degree-granting institutions of higher education and in accordance with statutory or system regulatory requirements. The institution provides appropriate information about the awarding of academic credit. (Standard II.A.9 and II.A.10)

11. **Student Learning and Student Achievement**
    The institution defines standards for student achievement and assesses its performance against those standards. The institution publishes for each program the program’s expected student learning and any program-specific achievement outcomes. Through regular and systematic assessment, it demonstrates that students who complete programs, no matter where or how they are offered, achieve the identified outcomes and that the standards for student achievement are met. (Standard I.B.2, 1.B.3, and II.A.1)
12. General Education
The institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and promote intellectual inquiry. The general education component includes an introduction to some of the major areas of knowledge. General education courses are selected to ensure students achieve comprehensive learning outcomes in the degree program. Degree credit for the general education component must be consistent with levels of quality and rigor appropriate to higher education. (Standard II.A.12 and II.A.5)

13. Academic Freedom
The institution’s faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as judged by the academic/educational community in general. Regardless of institutional affiliation or sponsorship, the institution maintains an atmosphere in which intellectual freedom and independence exist. (Standard I.C.7)

14. Faculty
The institution has a sufficient number of qualified faculty, which includes full time faculty and may include part time and adjunct faculty, to achieve the institutional mission and purposes. The number is sufficient in size and experience to support all of the institution’s educational programs. A clear statement of faculty responsibilities must include development and review of curriculum as well as assessment of learning. (Standard III.A.7 and III.A.2)

15. Student Support Services
The institution provides for all of its students appropriate student support services that foster student learning and development within the context of the institutional mission. (Standard II.C.1 and II.C.3)

16. Admissions
The institution has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs. (Standard II.C.6)

17. Information and Learning Support Services
The institution provides, through ownership or contractual agreement, specific long-term access to sufficient information and learning support services adequate for its mission and instructional programs in whatever format whenever and wherever they are offered. (Standard II.B.1 and II.B.4)

18. Financial Resources
The institution documents a funding base, financial resources, and plans for financial development adequate to support student learning programs and services, to improve institutional effectiveness, and to assure financial stability. (Standard III.D.1)
19. Institutional Planning and Evaluation
The institution systematically evaluates and makes public how well and in what ways it is accomplishing its purposes, including assessment of student learning outcomes. The institution provides evidence of planning for improvement of institutional structures and processes, student achievement of educational goals, and student learning. The institution assesses progress toward achieving its stated goals and makes decisions regarding improvement through an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and re-evaluation. (Standard I.B.9 and I.C.3).

20. Integrity in Communication with the Public
The institution provides a print or electronic catalog for its constituencies with precise, accurate, and current information concerning the following:

**General Information**
- Official Name, Address(es), Telephone Number(s), and Website Address of the Institution
- Educational Mission
- Representation of accredited status with ACCJC and with programmatic accreditors, if any
- Course, Program, and Degree Offerings
- Student Learning Outcomes for Programs and Degrees
- Academic Calendar and Program Length
- Academic Freedom Statement
- Available Student Financial Aid
- Available Learning Resources
- Names and Degrees of Administrators and Faculty
- Names of Governing Board Members

**Requirements**
- Admissions
- Student Fees and Other Financial Obligations
- Degree, Certificates, Graduation and Transfer

**Major Policies Affecting Students**
- Academic Regulations, including Academic Honesty
- Nondiscrimination
- Acceptance and Transfer of Credits
- Transcripts
- Grievance and Complaint Procedures
- Sexual Harassment
- Refund of Fees

**Locations or Publications where Other Policies may be Found.** (Standard I.C.2)
21. **Integrity in Relations with the Accrediting Commission**

The institution provides assurance that it adheres to the Eligibility Requirements, Accreditation Standards and Commission policies, describes itself in identical terms to all its accrediting agencies, communicates any changes in its accredited status, and agrees to disclose information required by the Commission to achieve its accrediting responsibilities. The institution will comply with Commission requests, directives, decisions and policies, and will make complete, accurate, and honest disclosure. Failure to do so is sufficient reason, in and of itself, for the Commission to impose a sanction, or to deny or revoke candidacy or accreditation. (Standard I.C.12 and 1.C.13)
2014 Accreditation Standards
Introduction

The primary purpose of an ACCJC-accredited institution is to foster student learning and student achievement. An effective institution ensures that its resources, programs, and services, whenever, wherever, and however delivered, support student learning and achievement. The effective institution ensures academic quality and continuous improvement through ongoing assessment of learning and achievement and pursues institutional excellence and improvement through ongoing, integrated planning and evaluation.

There are four Standards that work together to define and promote student success, academic quality, institutional integrity, and excellence. The mission provides a framework for all institutional goals and activities. The institution provides the means for students to learn and achieve their goals, assesses how well learning is occurring, and strives to improve learning and achievement through ongoing, systematic, and integrated evaluation and planning (Standard I). Student learning programs and support services make possible the academic quality that supports student success (Standard II). Human, physical, technology, and financial resources enable these programs and services to function and improve (Standard III). Ethical and effective leadership throughout the organization guides the accomplishment of the mission and supports institutional effectiveness and improvement (Standard IV). Integrating the elements of the Standards gives institutions the means to develop a comprehensive assessment of academic quality, institutional integrity and effectiveness, and a path to continuous improvement.
Standard I: Mission, Academic Quality and Institutional Effectiveness, and Integrity

The institution demonstrates strong commitment to a mission that emphasizes student learning and student achievement. Using analysis of quantitative and qualitative data, the institution continuously and systematically evaluates, plans, implements, and improves the quality of its educational programs and services. The institution demonstrates integrity in all policies, actions, and communication. The administration, faculty, staff, and governing board members act honestly, ethically, and fairly in the performance of their duties.

A. Mission

1. The mission describes the institution’s broad educational purposes, its intended student population, the types of degrees and other credentials it offers, and its commitment to student learning and student achievement. (ER 6)

2. The institution uses data to determine how effectively it is accomplishing its mission, and whether the mission directs institutional priorities in meeting the educational needs of students.

3. The institution’s programs and services are aligned with its mission. The mission guides institutional decision-making, planning, and resource allocation and informs institutional goals for student learning and achievement.

4. The institution articulates its mission in a widely published statement approved by the governing board. The mission statement is periodically reviewed and updated as necessary. (ER 6)

B. Assuring Academic Quality and Institutional Effectiveness

Academic Quality

1. The institution demonstrates a sustained, substantive and collegial dialog about student outcomes, student equity, academic quality, institutional effectiveness, and continuous improvement of student learning and achievement.

2. The institution defines and assesses student learning outcomes for all instructional programs and student and learning support services. (ER 11)

3. The institution establishes institution-set standards for student achievement, appropriate to its mission, assesses how well it is achieving them in pursuit of continuous improvement, and publishes this information. (ER 11)

4. The institution uses assessment data and organizes its institutional processes to support student learning and student achievement.
Institutional Effectiveness

5. The institution assesses accomplishment of its mission through program review and evaluation of goals and objectives, student learning outcomes, and student achievement. Quantitative and qualitative data are disaggregated for analysis by program type and mode of delivery.

6. The institution disaggregates and analyzes learning outcomes and achievement for subpopulations of students. When the institution identifies performance gaps, it implements strategies, which may include allocation or reallocation of human, fiscal and other resources, to mitigate those gaps and evaluates the efficacy of those strategies.

7. The institution regularly evaluates its policies and practices across all areas of the institution, including instructional programs, student and learning support services, resource management, and governance processes to assure their effectiveness in supporting academic quality and accomplishment of mission.

8. The institution broadly communicates the results of all of its assessment and evaluation activities so that the institution has a shared understanding of its strengths and weaknesses and sets appropriate priorities.

9. The institution engages in continuous, broad based, systematic evaluation and planning. The institution integrates program review, planning, and resource allocation into a comprehensive process that leads to accomplishment of its mission and improvement of institutional effectiveness and academic quality. Institutional planning addresses short- and long-range needs for educational programs and services and for human, physical, technology, and financial resources. (ER 19)

C. Institutional Integrity

1. The institution assures the clarity, accuracy, and integrity of information provided to students and prospective students, personnel, and all persons or organizations related to its mission statement, learning outcomes, educational programs, and student support services. The institution gives accurate information to students and the public about its accreditation status with all of its accreditors. (ER 20)

2. The institution provides a print or online catalog for students and prospective students with precise, accurate, and current information on all facts, requirements, policies, and procedures listed in the “Catalog Requirements” (see endnote). (ER 20)

3. The institution uses documented assessment of student learning and evaluation of student achievement to communicate matters of academic quality to appropriate constituencies, including current and prospective students and the public. (ER 19)

4. The institution describes its certificates and degrees in terms of their purpose, content, course requirements, and expected learning outcomes.
5. The institution regularly reviews institutional policies, procedures, and publications to assure integrity in all representations of its mission, programs, and services.

6. The institution accurately informs current and prospective students regarding the total cost of education, including tuition, fees, and other required expenses, including textbooks, and other instructional materials.

7. In order to assure institutional and academic integrity, the institution uses and publishes governing board policies on academic freedom and responsibility. These policies make clear the institution’s commitment to the free pursuit and dissemination of knowledge, and its support for an atmosphere in which intellectual freedom exists for all constituencies, including faculty and students. (ER 13)

8. The institution establishes and publishes clear policies and procedures that promote honesty, responsibility and academic integrity. These policies apply to all constituencies and include specifics relative to each, including student behavior, academic honesty and the consequences for dishonesty.

9. Faculty distinguish between personal conviction and professionally accepted views in a discipline. They present data and information fairly and objectively.

10. Institutions that require conformity to specific codes of conduct of staff, faculty, administrators, or students, or that seek to instill specific beliefs or world views, give clear prior notice of such policies, including statements in the catalog and/or appropriate faculty and student handbooks.

11. Institutions operating in foreign locations operate in conformity with the Standards and applicable Commission policies for all students. Institutions must have authorization from the Commission to operate in a foreign location.

12. The institution agrees to comply with Eligibility Requirements, Accreditation Standards, Commission policies, guidelines, and requirements for public disclosure, institutional reporting, team visits, and prior approval of substantive changes. When directed to act by the Commission, the institution responds to meet requirements within a time period set by the Commission. It discloses information required by the Commission to carry out its accrediting responsibilities. (ER 21)

13. The institution advocates and demonstrates honesty and integrity in its relationships with external agencies, including compliance with regulations and statutes. It describes itself in consistent terms to all of its accrediting agencies and communicates any changes in its accredited status to the Commission, students, and the public. (ER 21)

14. The institution ensures that its commitments to high quality education, student achievement and student learning are paramount to other objectives such as generating financial returns for investors, contributing to a related or parent organization, or supporting external interests.

Standard I: Institutional Mission and Effectiveness - Standard IC
Standard II: Student Learning Programs and Support Services

The institution offers instructional programs, library and learning support services, and student support services aligned with its mission. The institution’s programs are conducted at levels of quality and rigor appropriate for higher education. The institution assesses its educational quality through methods accepted in higher education, makes the results of its assessments available to the public, and uses the results to improve educational quality and institutional effectiveness. The institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and to promote intellectual inquiry. The provisions of this standard are broadly applicable to all instructional programs and student and learning support services offered in the name of the institution.

A. Instructional Programs

1. All instructional programs, regardless of location or means of delivery, including distance education and correspondence education, are offered in fields of study consistent with the institution’s mission, are appropriate to higher education, and culminate in student attainment of identified student learning outcomes, and achievement of degrees, certificates, employment, or transfer to other higher education programs. (ER 9 and ER 11)

2. Faculty, including full time, part time, and adjunct faculty, ensure that the content and methods of instruction meet generally accepted academic and professional standards and expectations. Faculty and others responsible act to continuously improve instructional courses, programs and directly related services through systematic evaluation to assure currency, improve teaching and learning strategies, and promote student success.

3. The institution identifies and regularly assesses learning outcomes for courses, programs, certificates and degrees using established institutional procedures. The institution has officially approved and current course outlines that include student learning outcomes. In every class section students receive a course syllabus that includes learning outcomes from the institution’s officially approved course outline.

4. If the institution offers pre-collegiate level curriculum, it distinguishes that curriculum from college level curriculum and directly supports students in learning the knowledge and skills necessary to advance to and succeed in college level curriculum.

5. The institution’s degrees and programs follow practices common to American higher education, including appropriate length, breadth, depth, rigor, course sequencing, time to completion, and synthesis of learning. The institution ensures that minimum degree requirements are 60 semester credits or equivalent at the associate level, and 120 credits or equivalent at the baccalaureate level. (ER 12)

6. The institution schedules courses in a manner that allows students to complete certificate and degree programs within a period of time consistent with established expectations in higher education. (ER 9)
7. The institution effectively uses delivery modes, teaching methodologies and learning support services that reflect the diverse and changing needs of its students, in support of equity in success for all students.

8. The institution validates the effectiveness of department-wide course and/or program examinations, where used, including direct assessment of prior learning. The institution ensures that processes are in place to reduce test bias and enhance reliability.

9. The institution awards course credit, degrees and certificates based on student attainment of learning outcomes. Units of credit awarded are consistent with institutional policies that reflect generally accepted norms or equivalencies in higher education. If the institution offers courses based on clock hours, it follows Federal standards for clock-to-credit-hour conversions. (ER 10)

10. The institution makes available to its students clearly stated transfer-of-credit policies in order to facilitate the mobility of students without penalty. In accepting transfer credits to fulfill degree requirements, the institution certifies that the expected learning outcomes for transferred courses are comparable to the learning outcomes of its own courses. Where patterns of student enrollment between institutions are identified, the institution develops articulation agreements as appropriate to its mission. (ER 10)

11. The institution includes in all of its programs, student learning outcomes, appropriate to the program level, in communication competency, information competency, quantitative competency, analytic inquiry skills, ethical reasoning, the ability to engage diverse perspectives, and other program-specific learning outcomes.

12. The institution requires of all of its degree programs a component of general education based on a carefully considered philosophy for both associate and baccalaureate degrees that is clearly stated in its catalog. The institution, relying on faculty expertise, determines the appropriateness of each course for inclusion in the general education curriculum, based upon student learning outcomes and competencies appropriate to the degree level. The learning outcomes include a student’s preparation for and acceptance of responsible participation in civil society, skills for lifelong learning and application of learning, and a broad comprehension of the development of knowledge, practice, and interpretive approaches in the arts and humanities, the sciences, mathematics, and social sciences. (ER 12)

13. All degree programs include focused study in at least one area of inquiry or in an established interdisciplinary core. The identification of specialized courses in an area of inquiry or interdisciplinary core is based upon student learning outcomes and competencies, and include mastery, at the appropriate degree level, of key theories and practices within the field of study.

14. Graduates completing career-technical certificates and degrees demonstrate technical and professional competencies that meet employment standards and other applicable standards and preparation for external licensure and certification.
15. When programs are eliminated or program requirements are significantly changed, the institution makes appropriate arrangements so that enrolled students may complete their education in a timely manner with a minimum of disruption.

16. The institution regularly evaluates and improves the quality and currency of all instructional programs offered in the name of the institution, including collegiate, pre-collegiate, career-technical, and continuing and community education courses and programs, regardless of delivery mode or location. The institution systematically strives to improve programs and courses to enhance learning outcomes and achievement for students.
B. Library and Learning Support Services

1. The institution supports student learning and achievement by providing library, and other learning support services to students and to personnel responsible for student learning and support. These services are sufficient in quantity, currency, depth, and variety to support educational programs, regardless of location or means of delivery, including distance education and correspondence education. Learning support services include, but are not limited to, library collections, tutoring, learning centers, computer laboratories, learning technology, and ongoing instruction for users of library and other learning support services. (ER 17)

2. Relying on appropriate expertise of faculty, including librarians, and other learning support services professionals, the institution selects and maintains educational equipment and materials to support student learning and enhance the achievement of the mission.

3. The institution evaluates library and other learning support services to assure their adequacy in meeting identified student needs. Evaluation of these services includes evidence that they contribute to the attainment of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.

4. When the institution relies on or collaborates with other institutions or other sources for library and other learning support services for its instructional programs, it documents that formal agreements exist and that such resources and services are adequate for the institution’s intended purposes, are easily accessible and utilized. The institution takes responsibility for and assures the security, maintenance, and reliability of services provided either directly or through contractual arrangement. The institution regularly evaluates these services to ensure their effectiveness. (ER 17)
C. **Student Support Services**

1. The institution regularly evaluates the quality of student support services and demonstrates that these services, regardless of location or means of delivery, including distance education and correspondence education, support student learning, and enhance accomplishment of the mission of the institution. (ER 15)

2. The institution identifies and assesses learning support outcomes for its student population and provides appropriate student support services and programs to achieve those outcomes. The institution uses assessment data to continuously improve student support programs and services.

3. The institution assures equitable access to all of its students by providing appropriate, comprehensive, and reliable services to students regardless of service location or delivery method. (ER 15)

4. Co-curricular programs and athletics programs are suited to the institution’s mission and contribute to the social and cultural dimensions of the educational experience of its students. If the institution offers co-curricular or athletic programs, they are conducted with sound educational policy and standards of integrity. The institution has responsibility for the control of these programs, including their finances.

5. The institution provides counseling and/or academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function. Counseling and advising programs orient students to ensure they understand the requirements related to their programs of study and receive timely, useful, and accurate information about relevant academic requirements, including graduation and transfer policies.

6. The institution has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs. The institution defines and advises students on clear pathways to complete degrees, certificate and transfer goals. (ER 16)

7. The institution regularly evaluates admissions and placement instruments and practices to validate their effectiveness while minimizing biases.

8. The institution maintains student records permanently, securely, and confidentially, with provision for secure backup of all files, regardless of the form in which those files are maintained. The institution publishes and follows established policies for release of student records.
Standard III: Resources

The institution effectively uses its human, physical, technology, and financial resources to achieve its mission and to improve academic quality and institutional effectiveness. Accredited colleges in multi-college systems may be organized so that responsibility for resources, allocation of resources, and planning rests with the district/system. In such cases, the district/system is responsible for meeting the Standards, and an evaluation of its performance is reflected in the accredited status of the institution(s).

A. Human Resources

1. The institution assures the integrity and quality of its programs and services by employing administrators, faculty and staff who are qualified by appropriate education, training, and experience to provide and support these programs and services. Criteria, qualifications, and procedures for selection of personnel are clearly and publicly stated and address the needs of the institution in serving its student population. Job descriptions are directly related to institutional mission and goals and accurately reflect position duties, responsibilities, and authority.

2. Faculty qualifications include knowledge of the subject matter and requisite skills for the service to be performed. Factors of qualification include appropriate degrees, professional experience, discipline expertise, level of assignment, teaching skills, scholarly activities, and potential to contribute to the mission of the institution. Faculty job descriptions include development and review of curriculum as well as assessment of learning. (ER 14)

3. Administrators and other employees responsible for educational programs and services possess qualifications necessary to perform duties required to sustain institutional effectiveness and academic quality.

4. Required degrees held by faculty, administrators and other employees are from institutions accredited by recognized U.S. accrediting agencies. Degrees from non-U.S. institutions are recognized only if equivalence has been established.

5. The institution assures the effectiveness of its human resources by evaluating all personnel systematically and at stated intervals. The institution establishes written criteria for evaluating all personnel, including performance of assigned duties and participation in institutional responsibilities and other activities appropriate to their expertise. Evaluation processes seek to assess effectiveness of personnel and encourage improvement. Actions taken following evaluations are formal, timely, and documented.

6. The evaluation of faculty, academic administrators, and other personnel directly responsible for student learning includes, as a component of that evaluation, consideration of how these employees use the results of the assessment of learning outcomes to improve teaching and learning.
7. The institution maintains a sufficient number of qualified faculty, which includes full time faculty and may include part time and adjunct faculty, to assure the fulfillment of faculty responsibilities essential to the quality of educational programs and services to achieve institutional mission and purposes. (ER 14)

8. An institution with part time and adjunct faculty has employment policies and practices which provide for their orientation, oversight, evaluation, and professional development. The institution provides opportunities for integration of part time and adjunct faculty into the life of the institution.

9. The institution has a sufficient number of staff with appropriate qualifications to support the effective educational, technological, physical, and administrative operations of the institution. (ER 8)

10. The institution maintains a sufficient number of administrators with appropriate preparation and expertise to provide continuity and effective administrative leadership and services that support the institution’s mission and purposes. (ER 8)

11. The institution establishes, publishes, and adheres to written personnel policies and procedures that are available for information and review. Such policies and procedures are fair and equitably and consistently administered.

12. Through its policies and practices, the institution creates and maintains appropriate programs, practices, and services that support its diverse personnel. The institution regularly assesses its record in employment equity and diversity consistent with its mission.

13. The institution upholds a written code of professional ethics for all of its personnel, including consequences for violation.

14. The institution plans for and provides all personnel with appropriate opportunities for continued professional development, consistent with the institutional mission and based on evolving pedagogy, technology, and learning needs. The institution systematically evaluates professional development programs and uses the results of these evaluations as the basis for improvement.

15. The institution makes provision for the security and confidentiality of personnel records. Each employee has access to his/her personnel records in accordance with law.
B. Physical Resources

1. The institution assures safe and sufficient physical resources at all locations where it offers courses, programs, and learning support services. They are constructed and maintained to assure access, safety, security, and a healthful learning and working environment.

2. The institution plans, acquires or builds, maintains, and upgrades or replaces its physical resources, including facilities, equipment, land, and other assets, in a manner that assures effective utilization and the continuing quality necessary to support its programs and services and achieve its mission.

3. To assure the feasibility and effectiveness of physical resources in supporting institutional programs and services, the institution plans and evaluates its facilities and equipment on a regular basis, taking utilization and other relevant data into account.

4. Long-range capital plans support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment.

C. Technology Resources

1. Technology services, professional support, facilities, hardware, and software are appropriate and adequate to support the institution’s management and operational functions, academic programs, teaching and learning, and support services.

2. The institution continuously plans for, updates and replaces technology to ensure its technological infrastructure, quality and capacity are adequate to support its mission, operations, programs, and services.

3. The institution assures that technology resources at all locations where it offers courses, programs, and services are implemented and maintained to assure reliable access, safety, and security.

4. The institution provides appropriate instruction and support for faculty, staff, students, and administrators, in the effective use of technology and technology systems related to its programs, services, and institutional operations.

5. The institution has policies and procedures that guide the appropriate use of technology in the teaching and learning processes.
D. Financial Resources

Planning

1. Financial resources are sufficient to support and sustain student learning programs and services and improve institutional effectiveness. The distribution of resources supports the development, maintenance, allocation and reallocation, and enhancement of programs and services. The institution plans and manages its financial affairs with integrity and in a manner that ensures financial stability. (ER 18)

2. The institution’s mission and goals are the foundation for financial planning, and financial planning is integrated with and supports all institutional planning. The institution has policies and procedures to ensure sound financial practices and financial stability. Appropriate financial information is disseminated throughout the institution in a timely manner.

3. The institution clearly defines and follows its guidelines and processes for financial planning and budget development, with all constituencies having appropriate opportunities to participate in the development of institutional plans and budgets.

Fiscal Responsibility and Stability

4. Institutional planning reflects a realistic assessment of financial resource availability, development of financial resources, partnerships, and expenditure requirements.

5. To assure the financial integrity of the institution and responsible use of its financial resources, the internal control structure has appropriate control mechanisms and widely disseminates dependable and timely information for sound financial decision making. The institution regularly evaluates its financial management practices and uses the results to improve internal control systems.

6. Financial documents, including the budget, have a high degree of credibility and accuracy, and reflect appropriate allocation and use of financial resources to support student learning programs and services.

7. Institutional responses to external audit findings are comprehensive, timely, and communicated appropriately.

8. The institution’s financial and internal control systems are evaluated and assessed for validity and effectiveness, and the results of this assessment are used for improvement.

9. The institution has sufficient cash flow and reserves to maintain stability, support strategies for appropriate risk management, and, when necessary, implement contingency plans to meet financial emergencies and unforeseen occurrences.

10. The institution practices effective oversight of finances, including management of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations or foundations, and institutional investments and assets.
Liabilities

11. The level of financial resources provides a reasonable expectation of both short-term and long-term financial solvency. When making short-range financial plans, the institution considers its long-range financial priorities to assure financial stability. The institution clearly identifies, plans, and allocates resources for payment of liabilities and future obligations.

12. The institution plans for and allocates appropriate resources for the payment of liabilities and future obligations, including Other Post-Employment Benefits (OPEB), compensated absences, and other employee related obligations. The actuarial plan to determine Other Post-Employment Benefits (OPEB) is current and prepared as required by appropriate accounting standards.

13. On an annual basis, the institution assesses and allocates resources for the repayment of any locally incurred debt instruments that can affect the financial condition of the institution.

14. All financial resources, including short- and long-term debt instruments (such as bonds and Certificates of Participation), auxiliary activities, fund-raising efforts, and grants, are used with integrity in a manner consistent with the intended purpose of the funding source.

15. The institution monitors and manages student loan default rates, revenue streams, and assets to ensure compliance with federal requirements, including Title IV of the Higher Education Act, and comes into compliance when the federal government identifies deficiencies.

Contractual Agreements

16. Contractual agreements with external entities are consistent with the mission and goals of the institution, governed by institutional policies, and contain appropriate provisions to maintain the integrity of the institution and the quality of its programs, services, and operations.
Standard IV: Leadership and Governance

The institution recognizes and uses the contributions of leadership throughout the organization for promoting student success, sustaining academic quality, integrity, fiscal stability, and continuous improvement of the institution. Governance roles are defined in policy and are designed to facilitate decisions that support student learning programs and services and improve institutional effectiveness, while acknowledging the designated responsibilities of the governing board and the chief executive officer. Through established governance structures, processes, and practices, the governing board, administrators, faculty, staff, and students work together for the good of the institution. In multi-college districts or systems, the roles within the district/system are clearly delineated. The multi-college district or system has policies for allocation of resources to adequately support and sustain the colleges.

A. Decision-Making Roles and Processes

1. Institutional leaders create and encourage innovation leading to institutional excellence. They support administrators, faculty, staff, and students, no matter what their official titles, in taking initiative for improving the practices, programs, and services in which they are involved. When ideas for improvement have policy or significant institution-wide implications, systematic participative processes are used to assure effective planning and implementation.

2. The institution establishes and implements policy and procedures authorizing administrator, faculty, and staff participation in decision-making processes. The policy makes provisions for student participation and consideration of student views in those matters in which students have a direct and reasonable interest. Policy specifies the manner in which individuals bring forward ideas and work together on appropriate policy, planning, and special-purpose committees.

3. Administrators and faculty, through policy and procedures, have a substantive and clearly defined role in institutional governance and exercise a substantial voice in institutional policies, planning, and budget that relate to their areas of responsibility and expertise.

4. Faculty and academic administrators, through policy and procedures, and through well-defined structures, have responsibility for recommendations about curriculum and student learning programs and services.

5. Through its system of board and institutional governance, the institution ensures the appropriate consideration of relevant perspectives; decision-making aligned with expertise and responsibility; and timely action on institutional plans, policies, curricular change, and other key considerations.

6. The processes for decision-making and the resulting decisions are documented and widely communicated across the institution.

7. Leadership roles and the institution’s governance and decision-making policies, procedures, and processes are regularly evaluated to assure their integrity and effectiveness. The institution widely communicates the results of these evaluations and uses them as the basis for improvement.
B. Chief Executive Officer

1. The institutional chief executive officer (CEO) has primary responsibility for the quality of the institution. The CEO provides effective leadership in planning, organizing, budgeting, selecting and developing personnel, and assessing institutional effectiveness.

2. The CEO plans, oversees, and evaluates an administrative structure organized and staffed to reflect the institution’s purposes, size, and complexity. The CEO delegates authority to administrators and others consistent with their responsibilities, as appropriate.

3. Through established policies and procedures, the CEO guides institutional improvement of the teaching and learning environment by:
   - establishing a collegial process that sets values, goals, and priorities;
   - ensuring the college sets institutional performance standards for student achievement;
   - ensuring that evaluation and planning rely on high quality research and analysis of external and internal conditions;
   - ensuring that educational planning is integrated with resource planning and allocation to support student achievement and learning;
   - ensuring that the allocation of resources supports and improves learning and achievement; and
   - establishing procedures to evaluate overall institutional planning and implementation efforts to achieve the mission of the institution.

4. The CEO has the primary leadership role for accreditation, ensuring that the institution meets or exceeds Eligibility Requirements, Accreditation Standards, and Commission policies at all times. Faculty, staff, and administrative leaders of the institution also have responsibility for assuring compliance with accreditation requirements.

5. The CEO assures the implementation of statutes, regulations, and governing board policies and assures that institutional practices are consistent with institutional mission and policies, including effective control of budget and expenditures.

6. The CEO works and communicates effectively with the communities served by the institution.
C. Governing Board

1. The institution has a governing board that has authority over and responsibility for policies to assure the academic quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. (ER 7)

2. The governing board acts as a collective entity. Once the board reaches a decision, all board members act in support of the decision.

3. The governing board adheres to a clearly defined policy for selecting and evaluating the CEO of the college and/or the district/system.

4. The governing board is an independent, policy-making body that reflects the public interest in the institution’s educational quality. It advocates for and defends the institution and protects it from undue influence or political pressure. (ER 7)

5. The governing board establishes policies consistent with the college/district/system mission to ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them. The governing board has ultimate responsibility for educational quality, legal matters, and financial integrity and stability.

6. The institution or the governing board publishes the board bylaws and policies specifying the board’s size, duties, responsibilities, structure, and operating procedures.

7. The governing board acts in a manner consistent with its policies and bylaws. The board regularly assesses its policies and bylaws for their effectiveness in fulfilling the college/district/system mission and revises them as necessary.

8. To ensure the institution is accomplishing its goals for student success, the governing board regularly reviews key indicators of student learning and achievement and institutional plans for improving academic quality.

9. The governing board has an ongoing training program for board development, including new member orientation. It has a mechanism for providing for continuity of board membership and staggered terms of office.

10. Board policies and/or bylaws clearly establish a process for board evaluation. The evaluation assesses the board’s effectiveness in promoting and sustaining academic quality and institutional effectiveness. The governing board regularly evaluates its practices and performance, including full participation in board training, and makes public the results. The results are used to improve board performance, academic quality, and institutional effectiveness.

11. The governing board upholds a code of ethics and conflict of interest policy, and individual board members adhere to the code. The board has a clearly defined policy for dealing with behavior that violates its code and implements it when necessary. A majority of the board members have no employment, family, ownership, or other
personal financial interest in the institution. Board member interests are disclosed and do not interfere with the impartiality of governing body members or outweigh the greater duty to secure and ensure the academic and fiscal integrity of the institution. (ER 7)

12. The governing board delegates full responsibility and authority to the CEO to implement and administer board policies without board interference and holds the CEO accountable for the operation of the district/system or college, respectively.

13. The governing board is informed about the Eligibility Requirements, the Accreditation Standards, Commission policies, accreditation processes, and the college’s accredited status, and supports through policy the college’s efforts to improve and excel. The board participates in evaluation of governing board roles and functions in the accreditation process.
D. Multi-College Districts or Systems

1. In multi-college districts or systems, the district/system CEO provides leadership in setting and communicating expectations of educational excellence and integrity throughout the district/system and assures support for the effective operation of the colleges. Working with the colleges, the district/system CEO establishes clearly defined roles, authority and responsibility between the colleges and the district/system.

2. The district/system CEO clearly delineates, documents, and communicates the operational responsibilities and functions of the district/system from those of the colleges and consistently adheres to this delineation in practice. The district/system CEO ensures that the colleges receive effective and adequate district/system provided services to support the colleges in achieving their missions. Where a district/system has responsibility for resources, allocation of resources, and planning, it is evaluated against the Standards, and its performance is reflected in the accredited status of the institution.

3. The district/system has a policy for allocation and reallocation of resources that are adequate to support the effective operations and sustainability of the colleges and district/system. The district/system CEO ensures effective control of expenditures.

4. The CEO of the district or system delegates full responsibility and authority to the CEOs of the colleges to implement and administer delegated district/system policies without interference and holds college CEO’s accountable for the operation of the colleges.

5. District/system planning and evaluation are integrated with college planning and evaluation to improve student learning and achievement and institutional effectiveness.

6. Communication between colleges and districts/systems ensures effective operations of the colleges and should be timely, accurate, and complete in order for the colleges to make decisions effectively.

7. The district/system CEO regularly evaluates district/system and college role delineations, governance and decision-making processes to assure their integrity and effectiveness in assisting the colleges in meeting educational goals for student achievement and learning. The district/system widely communicates the results of these evaluations and uses them as the basis for improvement.
End Note - Catalog Requirements

The following list of required information must be included in the college catalog.

1. General Information
   - Official Name, Address(es), Telephone Number(s), and Website Address of the Institution
   - Educational Mission
   - Representation of accredited status with ACCJC, and with programmatic accreditors if any
   - Course, Program, and Degree Offerings
   - Student Learning Outcomes for Programs and Degrees
   - Academic Calendar and Program Length,
   - Academic Freedom Statement
   - Available Student Financial Aid
   - Available Learning Resources
   - Names and Degrees of Administrators and Faculty
   - Names of Governing Board Members

2. Requirements
   - Admissions
   - Student Tuition, Fees, and Other Financial Obligations
   - Degrees, Certificates, Graduation and Transfer

3. Major Policies and Procedures Affecting Students
   - Academic Regulations, including Academic Honesty
   - Nondiscrimination
   - Acceptance and Transfer of Credits
   - Transcripts
   - Grievance and Complaint Procedures
   - Sexual Harassment
   - Refund of Fees

4. Locations or Publications Where Other Policies may be Found
Commission Policies
Policy on Award of Credit
(Adopted June 2004; Revised June 2012, June 2013)

Background
While many institutions rely on the calculation of in-class time to determine the amount of credit awarded for a particular class, Accreditation Standards require that institutions award credit based on student achievement of stated student learning outcomes. The Accreditation Standards also require that the units awarded be consistent with institutional policies that reflect generally accepted norms in higher education (Standard IIA.2.h.). In addition, institutions increasingly are providing more varied educational experiences as a means for students to earn college credits such as distance education, independent study, group project work, study abroad, work-experience, transfer of credits from other institutions, credit by examination, and through direct assessment programs. Institutional policy and practice in award of credit must assure the integrity of credit awarded to all educational experiences.

Policy
Institutions must maintain policies and procedures that assure award of credit for educational experiences is based on achievement of stated student learning outcomes, comparability of that learning to other institutions in higher education, applicability and appropriateness of that learning experience for the program or degree offered, and generally accepted norms in higher education. Institutions must conform to a commonly accepted minimum program length as per the Commission Policy on Institutional Degrees and Credit. Institutions must also conform to U.S. Department of Education regulations defining a credit hour and to regulations regarding clock to credit hour conversions that may be applicable to non-degree undergraduate programs. Institutions must obtain Substantive Change approval and approval from the U.S. Department of Education for direct assessment programs. The Commission will conduct an effective review and evaluation of the reliability and accuracy of the institution’s assignment of credit hours used for federal program purposes.

Policy Elements
In the determinations about the award of credit, institutions have a responsibility to assure that the courses or other educational experiences that are awarded or assigned credit meet the following criteria:

1 34 C.F.R. § 668.10.
2 34 C.F.R. § 602.2, 602.24(f). The Commission will: review the institution’s policies and procedures for determining the credit hours and the application of the institution’s policies and procedures to its programs and coursework; make a reasonable determination of whether the institution’s assignment of credit hours conforms to commonly accepted practices in higher education; review and evaluate the institution’s policies and procedures for the award of credit through sampling and other methods in the evaluation; and take appropriate actions if an institution is found to be deficient, including notifying the U.S. Secretary of Education if the institution demonstrates systemic non-compliance with its own or the ACCJC’s policies in one or more programs of study.
• The courses or other educational experiences have identified student learning outcomes that students must meet at a defined level of performance to receive credit.
• The courses or other educational experiences meet standards of quality as defined by the institution.
• The credits awarded for a course or educational experience are comparable in quantity and nature to credits awarded to other courses at the institution.
• The credits are appropriate for higher education or for pre-collegiate education, and are defined as such.
• The credits are appropriate and applicable to the institution’s own educational programs leading to a degree, certificate, or other defined educational outcomes.

Institutions have a responsibility to assure that work offered for credit is of sufficient quality to produce the student learning outcomes necessary to meet standards of quality in higher education of transfer institutions, and of employers, as well as the program and degree requirements of the institution itself.

Institutions have a responsibility to be consistent in award of credit, particularly in the award of credit to learning gained through alternative methods of delivery or by other providers of training and education. Consistency is especially important in assuring a comparable level of student competence and learning for different activities assigned comparable credit.

Institutions have a responsibility to maintain the integrity of award of credit by clearly stating requirements in policies, publishing those policies in documents used by faculty and students, and assuring that the policies are adhered to. The public has a significant interest in higher education student learning outcomes. Public funding and private donations and support are based on expectations that award of credit is directly related to student learning and student competencies.
Statement on the Benefits of Accreditation

(Adopted June 2004; Revised January 2011; Edited June 2012, August 2012)

Background
Accreditation is the primary means by which colleges and universities in the United States assure and improve quality. Both accrediting bodies and the institutions they accredit must use the highest standards of professionalism to ensure that accreditation provides value to the institutions themselves, the students, the public, the government, and other institutions of higher education. The Accrediting Commission for Community and Junior Colleges is statutorily recognized by the U.S. Department of Education\textsuperscript{1} as one of seven (7) regional accrediting commissions.

Statement
The Commission shall ensure that its accrediting actions sustain and enhance quality and maintain the values of higher education among member institutions. The Commission serves the public interest by providing information on its actions to institutions, the public, and students.

Statement Elements
The Commission serves to assure a threshold level of quality. When the Commission accredits an institution, it certifies that the institution has an appropriate mission, has the resources necessary to accomplish its mission, has the data and utilizes those data appropriately to demonstrate that it is accomplishing its mission, and gives reasons to believe that it will continue to accomplish its mission.

The Commission functions to reinforce the following core values of higher education: institutional quality and autonomy, academic freedom, commitment to degree education, commitment to general education, and collegial governance. The Commission reinforces the value of institutional autonomy through its emphasis on a mission-based approach to quality review. The Commission values and supports academic freedom for all constituencies. The Commission provides a firm foundation for the value of the academic or career/technical degree and general education by requiring that institutions both grant degrees and offer general education as a component of every degree. The Commission’s accreditation process is a collegial process of peer review.

The Commission and its accreditation provide to students an assurance that the educational activities of the accredited institution have been found to meet Accreditation Standards and are satisfactory. This accredited status provides students the following benefits: easier

\textsuperscript{1} Authority is contained in in 34 C.F.R. § 602. Also see U.S. Department of Education listing of regional and national institutional accrediting agencies, http://www2.ed.gov/admins/finaid/accred/accreditation_pg6.html
transfer of earned academic credits when those credits are appropriate to the receiving institution; the opportunity to access federal financial aid; and greater acceptance of the students’ credits, certificates and degrees by employers, licensing agencies, and other institutions of higher education.

The Commission provides to its member institutions an incentive for self evaluation and self-directed institutional improvement through, the institutional self evaluation of educational quality and institutional effectiveness, the first stage of the accreditation process. The Commission provides to member institutions valuable information and recommendations for improvement through the external evaluation process, and through the Commission’s action letters, monitoring and follow up evaluations of institutions that may occur. The Commission provides to its member institutions a guard against external encroachment harmful to institutional quality, an enhanced reputation of the accredited institution because of its voluntary participation in peer review, and access to federal programs and private support that aid postsecondary education.

The Commission provides to the public an assurance that through external evaluation the institution conforms to established standards of good practice in higher education, and that its credits, certificates and degrees can be trusted. The Commission provides assurance that an institution of higher education is committed to improving the quality of its educational offerings and an assurance that the institution is operating within legal and fiscal practices of good conduct appropriate to an institution of higher education.
Background
A decision to close an educational institution is a serious one that requires thoughtful planning and careful consultation with all affected constituencies. Planning and consultation is equally important when implementing a closure that results from loss of state authorization or licensure, or for other reasons. Every effort should be devoted to informing each constituency, as fully and as early as possible, about the conditions requiring consideration of a decision of such importance.

Additionally, most institutions of higher education are entities established under the provisions of state or national law, and as such may have legal responsibilities (holding title to real property, for example) that may necessitate the continued existence of the organization after the educational activities of the institution have been terminated. In most cases an organization’s existence and educational activities will not be terminated simultaneously. This policy makes only incidental reference to such organization responsibilities and always in the educational context. It is imperative that a governing board, considering closing an institution under its care, should be guided not only by the following policy and by the state or appropriate authorizing education authorities, but also by advice of legal counsel.

Before the decision to close is made, the governing board should consider carefully such alternatives as merging with another institution, forming a consortium, or participating in extensive inter-institutional sharing and cooperation. As much as possible, the determination to close an institution should involve a consultative process, but responsibility for the final decision to close rests with the governing board.

The decision to close requires specific plans for appropriate provisions for students, faculty and staff and for the disposition of the institution’s assets. Failure to plan adequately will increase the inevitable distress to students, faculty, and staff.

Policy
This policy complies with 34 C.F.R. § 602.24 and the Higher Education Act § 496(c)(3) as amended by the Higher Education Opportunity Act (2008).

Before closing an institution, a governing board must fully inform all affected constituents of the potential closure as early as possible, and provide for student completion of programs and the securing of student records. Institutions must develop a Closure Plan and submit it to the Commission for substantive change review prior to closure.¹ A teach-out plan should be included in the Closure Plan, and teach-out agreements should be submitted to the

¹ Please refer to the Policy on Substantive Change.
Commission for action when the closing institution provides one hundred percent of instruction in at least one degree program. Institutions ordered on Show Cause may also be required to complete a Closure Plan, develop a preliminary closure plan, or make other preparations for closure.

Institutions which develop a teach-out plan that involves another institution at which the students will complete their program shall only be approved by the Commission if (1) there are teach-out agreements between institutions that are accredited or pre-accredited by a federally recognized accrediting agency, (2) the agreements are consistent with applicable standards and regulations, and (3) they provide for the equitable treatment of students.

An institution considering closure must address in its Closure Plan the following elements, each of which is discussed in more detail below:

- Student completion;
- Disposition of academic records and financial aid transcripts;
- Provisions for faculty and staff;
- Disposition of assets;
- Obligations to creditors;
- Coordination with the Accrediting Commission for Community and Junior Colleges;
- Key governing board obligations.

Policy Elements

A. Student Completion

Institutions considering closing, and institutions implementing a closure after loss of state authorization or licensure, or for other reasons, must provide for the academic needs of students who have not completed their degrees and educational programs. Arrangements for transfer to other institutions will require complete academic records and all other related information gathered in dossiers which can be transmitted promptly to receiving institutions. Agreements made with other institutions to receive transferring students and to accept their records must be submitted to the Accrediting Commission for Community and Junior Colleges (ACCJC) for approval. Where financial aid is concerned, particularly federal or state grants, arrangements must be made with the appropriate agencies to transfer the grants to the receiving institutions. In cases where students have held institutional scholarships or grants and there are available funds that can legally be used to support students while completing degrees and educational programs at other institutions, appropriate agreements must be negotiated. Where such arrangements cannot be completed, students must be fully informed. Institutions considering closing must use as their guide the equitable treatment of students by providing for the educational needs of students who have not completed their degrees and educational programs.

When a student has completed 75% of an academic degree and educational program in the closing institution and chooses to continue at another institution, arrangements shall be made to permit that student to complete the requirements for a degree and educational program elsewhere, but to receive the degree and educational program from the closed institution. The receiving institution must provide an educational program...
that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the institution that is closing. Such arrangements should also include provision for continuation of the institution’s accreditation by the Commission for this purpose only. These steps normally require the institution to continue as a legal organization for 12 to 18 months beyond the closing date, but any such arrangements must be established in careful consultation with the appropriate authorities and with their written consent. The institution that is closing must demonstrate that it shall remain stable, carry out its mission, meet all obligations to existing students, and demonstrate that it can provide students access to the programs and services without requiring them to move or travel substantial distances. The institution must provide students information about additional charges and costs, if any.

B. Disposition of Academic Records and Financial Aid Transcripts
All academic records, financial aid information, and other records must be prepared for permanent filing, including electronic filing. Arrangements must be made with another college or university or with the state archives to preserve the records. Notification must be sent to every current and past student indicating where the records are being stored and what the accessibility to those records will be. Where possible, a copy of a student’s record should also be forwarded to the individual student. The Commission must be notified of the location where student permanent records will be stored.

C. Provisions for Faculty and Staff
The institution must arrange for continuation of those faculty and staff who will be necessary for the completion of the institution’s work up to and after the closing date. It should be understood that the institution can make no guarantees, but genuinely good faith efforts should be made to assist faculty and staff in finding alternative employment. In the event that faculty or staff members find new positions, early resignations should be accepted.

D. Disposition of Assets
Determinations must be made to allocate whatever financial resources and assets remain after the basic needs of current students, faculty, and staff are provided. Institutional assets must be used in ways that would honor the intentions of the original providers. When the financial resources of the institution are inadequate to honor commitments, including those to the Commission, the governing board shall investigate what alternatives and protection are available under applicable bankruptcy laws before deciding to close. If funds are insufficient to maintain normal operations through the end of the closing process, the institution should consider the possibility of soliciting one-time gifts and donations to assist in fulfilling its final obligations.

In the case of a not-for-profit institution, state or national laws regarding the disposition of funds and institutional assets must be meticulously followed. Arrangements for the sale of the physical plant, equipment, the library, special collections, art, or other funds must be explored with legal counsel. In the case of wills, endowments, or special grants, the institution must discuss with the donors, grantors, executors of estates, and other providers of special funds arrangements to accommodate their wishes.
E. Obligations to Creditors
The institution must establish a clear understanding with its creditors and all other agencies involved with its activities to assure that their claims and interests will be properly processed. Insofar as possible, the institution shall assure that its final arrangements will not be subject to later legal proceedings which might jeopardize the records or status of its students or faculty. All concerned federal, national and state agencies need to be apprised of the institution’s situation, and any obligations relating to estate or governmental funds need to be cleared with the appropriate agencies.

Every effort shall be made to develop publicly defensible policies for dividing the resources equitably among those with claims against the institution. One of the best ways of achieving this goal is to involve potential claimants in the process of developing the policies. Time and effort devoted to carrying the process to a judicious conclusion may considerably reduce the likelihood of lawsuits or other forms of confrontation.

It is impossible to anticipate in advance the many claims that might be made against remaining resources of an institution, but the following three principles may help to identify and prioritize possible claims and to set priorities:

1. Students have the right to expect basic minimal services during the final term, not only in the academic division, but also in the business office, financial aid office, registrar’s office, counseling, and other essential support services. Staff must be retained long enough to provide these services. It may be appropriate to offer special incentives to keep key personnel present.

2. Reasonable notice must be given to all employees, explaining the possibility of early termination of contracts and that the reasons for retaining some personnel longer than others are based on satisfying the minimal needs of students and the legal requirements for closing.

3. Every effort shall be made to honor long-term financial obligations (loans, debentures, etc.) even though the parties holding such claims may choose not to press them.

F. Coordination with the ACCJC
The ACCJC and specialized accrediting bodies must be consulted and kept fully apprised of developments as the plan to close an institution progresses. Arrangements must be completed with the ACCJC in advance of closure in order to assure that a legally authorized and accredited institution awards degrees. A final report on the closing must be submitted to the ACCJC for its records. The ACCJC must also be notified of the location where student records will be stored.

G. Key Governing Board Obligations
The governing board must take a formal vote to terminate the institution on a specified date. That date will depend on a number of factors including the decision to file or not to file for bankruptcy. Another key factor is whether or not all obligations to students will have been satisfactorily discharged. This is particularly important if the decision is made to allow students to graduate from the institution by completing their degree requirements elsewhere. If such arrangements are made, the governing board must take

Policy on Closing an Institution
the legal action necessary to permit awarding degrees after the institution otherwise
ceases to function. Normally, a formal vote to award a degree is made after all
requirements have been met, but it is legally possible to make arrangements for a
student to complete the requirements for a degree at another institution and to receive
the degree from the closed institution. These requirements must be clearly specified
along with a deadline for completion. Also the governing board must identify the person
or persons authorized to determine whether or not these requirements have in fact been
satisfied. Arrangements must be completed with the Commission in advance in order to
assure that a legally authorized and accredited institution awards degrees.
Policy on Commission Actions on Institutions


Policy

Institutions applying for candidacy or initial accreditation and accredited institutions undergoing periodic evaluation for reaffirmation of accreditation will be reviewed by the Accrediting Commission. The Commission will examine institutional evidence of student learning and achievement, the Self Evaluation Report of Educational Quality and Institutional Effectiveness, the External Evaluation Report of Educational Quality and Institutional Effectiveness, and documents from previous evaluations to determine whether the institution complies with the Eligibility Requirements, Accreditation Standards, and Commission policies. The Commission will apply, as it deems appropriate, one of the actions listed in this policy.

In the case that a previously accredited institution cannot demonstrate that it meets the Eligibility Requirements, Accreditation Standards, and Commission policies, the Commission will impose a sanction as defined below. If the institution cannot document that it has come into compliance within a maximum of two years after receiving the initial sanction, the Commission will take adverse action. In keeping with the provisions of the Higher Education Act of 1965, as amended, the Commission defines adverse actions for accredited institutions as termination of accreditation; denial, or termination for institutions seeking candidacy; and denial for institutions seeking initial accreditation.

Policy Elements

I. Actions on Institutions that are Applicants for Candidacy or extension of Candidacy

Grant candidacy. Candidacy is a pre-accreditation status granted to institutions that have successfully undergone eligibility review as well as a comprehensive evaluation process using the Accreditation Standards, including preparation of an Institutional Self Evaluation Report and a review by an evaluation team. Candidacy is granted when the institution demonstrates the ability to meet all the Accreditation Standards and Commission policies, or to fully meet them within the two-year candidate period. Candidacy indicates that an institution has achieved initial association with the Commission and is progressing toward accreditation. During candidacy, the institution undertakes the necessary steps to reach demonstrable and complete compliance with Accreditation Standards. This includes an Institutional Self Evaluation Report in preparation for initial accreditation. Candidate status may be extended for two years, for a total period not to exceed four years.

Defer a decision on candidacy. A Commission decision on candidacy is postponed pending receipt of specified information, as identified by the Commission, from the institution.
**Extend candidacy.** Candidacy is extended in response to a college request when the Commission determines that a candidate institution has made significant progress toward meeting the Accreditation Standards, and Commission policies, and anticipates that the institution will meet all Accreditation Standards, and Commission policies if granted additional time to do so. Candidacy can be extended once for a two-year period. Four years in candidate status is the maximum allowable.

**Deny candidacy.** Candidacy is denied when the Commission determines that the institution has demonstrated that it does not meet all of the Eligibility Requirements, and does not meet a significant portion of the Accreditation Standards and Commission policies, and therefore cannot be expected to meet all Accreditation Standards and Commission policies within a two-year period. The institution may reapply for candidacy after two years by submitting an Institutional Self Evaluation Report. Denial of candidacy is subject to a request for review and appeal under the applicable policies and procedures of the Commission.

**Termination of candidacy.** Candidacy is terminated when the Commission determines that an institution has not maintained its eligibility for candidacy or has failed to explain or correct deficiencies of which it has been given notice. Termination is subject to a request for review and appeal under the applicable policies and procedures of the Commission.

**II. Actions on Institutions which are Applicants for Initial Accreditation**

**Grant initial accreditation.** Initial accreditation may be granted after a comprehensive institutional evaluation. The institution meets or exceeds the Eligibility Requirements, Accreditation Standards, and Commission policies. The institution is required to submit a Midterm Report in the third year of the six-year accreditation cycle. The institution must be fully evaluated again within a maximum of six years from the date of the Commission action granting initial accreditation.

**Grant initial accreditation and request a Follow-Up Report.** The institution substantially meets or exceeds the Eligibility Requirements, Accreditation Standards and Commission policies, but has recommendations on a small number of issues of some urgency which, if not addressed immediately, may threaten the ability of the institution to continue to meet the Eligibility Requirements, Accreditation Standards, and Commission policies. The Commission will specify the nature, purpose, scope, and due date of the report to be submitted. The institution is also required to submit a Midterm Report in the third year of the six-year accreditation cycle.

**Grant initial accreditation and request a Follow-Up Report with a visit.** The institution substantially meets or exceeds the Eligibility Requirements, Accreditation Standards and Commission policies, but has recommendations on a small number of issues of some urgency which, if not addressed immediately, may threaten the ability of the institution to continue to meet the Eligibility Requirements, Accreditation Standards, and Commission policies. The Commission will specify the nature, purpose, scope, and due date of the report to be submitted and of the visit to be made. The institution is also required to submit a Midterm Report in the third year of the six-year accreditation cycle.
Defer a decision on Initial Accreditation. A Commission decision on initial accreditation is postponed pending receipt of specified information from the institution, as identified by the Commission.

Extend candidacy. The Commission may extend candidacy in lieu of granting initial accreditation when the institution has not met the conditions for initial accreditation and has had candidacy. Candidacy can only be extended for a maximum of two years.

Deny Initial Accreditation. The Commission denies initial accreditation when an applicant institution no longer meets or fails to meet Accreditation Standards, Commission policies, or Eligibility Requirements within the maximum period allowed for a college to remain in candidacy. A denial is subject to a request for review and appeal under the applicable policies and procedures of the Commission. If initial accreditation is not granted, the institution may not reapply for candidacy for at least two years.

III. Actions on Institutions that are Applicants for Reaffirmation of Accreditation

Actions that Reaffirm Accreditation

Reaffirm accreditation. The institution substantially meets or exceeds the Eligibility Requirements, Accreditation Standards and Commission policies. Recommendations are directed toward strengthening the institution, not correcting situations where the institution fails to meet the Eligibility Requirements, Accreditation Standards and Commission policies. The institution is required to submit a Midterm Report in the third year of the six-year accreditation cycle.

Reaffirm accreditation, and request a Follow-Up Report. The institution substantially meets or exceeds the Eligibility Requirements, Accreditation Standards and Commission policies, but has recommendations on a small number of issues of some urgency which, if not addressed immediately, may threaten the ability of the institution to continue to meet the Eligibility Requirements, Accreditation Standards and Commission policies. The institution is required to submit a Follow-Up Report. The Commission will specify the issues to be addressed and the due date of the report. Resolution of the issues is expected within a one- to two-year period. The institution is also required to submit a Midterm Report in the third year of the six-year accreditation cycle.

Reaffirm accreditation, and request a Follow-Up Report with a visit. The institution substantially meets or exceeds the Eligibility Requirements, Accreditation Standards and Commission policies, but has recommendations on a small number of issues of some urgency which, if not addressed immediately, may threaten the ability of the institution to continue to meet the Eligibility Requirements, Accreditation Standards and Commission policies. The Commission will identify the issues to be addressed in the report, the due date of the report to be submitted, and specifics of the visit to be made. Resolution of the issues is expected within a one- to two-year period. The institution is also required to submit a Midterm Report in the third year of the six-year accreditation cycle.

Defer a decision on reaffirmation of accreditation. A Commission decision on reaffirmation of accreditation is postponed pending receipt of specified additional information.

Policy on Commission Actions on Institutions
information from the institution or to permit an institution to correct deficiencies and report to the Commission within six months or less. The response from the institution may be followed by a visit addressed primarily to the reasons for the decision. The Commission will specify the nature, purpose, and scope of the information to be submitted and of the visit to be made. The accredited status of the institution continues during the period of deferment.

IV. Sanctions

Institutions are advised that the U.S. Department of Education requires recognized accrediting bodies to terminate accreditation when an institution is determined to be out of compliance with Eligibility Requirements, Accreditation Standards and Commission policies and fails to come into compliance within a two-year period. Consequently, the Commission will take action to terminate accreditation if deficiencies are not resolved within this period. Under extraordinary circumstances, the institution may be granted additional time when the Commission determines good cause for extension exists.

A. Issue Warning. When the Commission finds that an institution has pursued a course deviating from the Commission’s Eligibility Requirements, Accreditation Standards, or Commission policies to an extent that gives concern to the Commission, it may issue a warning to the institution to correct its deficiencies, refrain from certain activities, or initiate certain activities. The Commission will specify the time within which the institution must resolve these deficiencies. During the warning period, the institution will be subject to reports and visits at a frequency to be determined by the Commission. If warning is issued as a result of the institution’s educational quality and institutional effectiveness review, reaffirmation is delayed during the period of warning. The accredited status of the institution continues during the warning period.

B. Impose Probation. When an institution deviates significantly from the Commission’s Eligibility Requirements, Accreditation Standards, or Commission policies, but not to such an extent as to warrant a Show Cause order or the termination of accreditation, or fails to respond to conditions imposed upon it by the Commission, including a warning, the institution may be placed on probation. The Commission will specify the time within which the institution must resolve deficiencies. During the probation period, the institution will be subject to reports and visits at a frequency to be determined by the Commission. If probation is imposed as a result of the institution’s educational quality and institutional effectiveness review, reaffirmation is delayed during the period of probation. The accredited status of the institution continues during the probation period.

C. Order Show Cause. When the Commission finds an institution to be in substantial non-compliance with its Eligibility Requirements, Accreditation Standards, or Commission policies, or when the institution has not responded to the conditions imposed by the Commission, the Commission will require the institution to Show Cause why its accreditation should not be withdrawn at the end of a stated period by demonstrating that it has corrected the deficiencies noted by the Commission and is
in compliance with the Eligibility Requirements, Accreditation Standards and Commission policies. In such cases, the burden of proof will rest on the institution to demonstrate why its accreditation should be continued. The Commission will specify the time within which the institution must resolve deficiencies. If the loss of accreditation will likely cause an institution to close, then during the Show Cause period, the institution must make preparations for closure according to the Commission’s “Policy on Closing an Institution.” While under a Show Cause order, the institution will be subject to reports and visits at a frequency to be determined by the Commission. If Show Cause is ordered as a result of the institution’s educational quality and institutional effectiveness review, reaffirmation is delayed during the Show Cause order. The accredited status of the institution continues during the period of the Show Cause order.

V. Actions that Terminate Accreditation

**Terminate Accreditation.** If, in the judgment of the Commission, an institution has not satisfactorily explained or corrected matters of which it has been given notice, or has taken an action that has placed it significantly out of compliance with the Eligibility Requirements, Accreditation Standards, and Commission policies, its accreditation may be terminated. The Commission will give the institution written reasons for its decision. Termination of accreditation is subject to a request for review and appeal under the applicable policies and procedures of the Commission. The accredited status of the institution continues pending completion of any review and appeal process the institution may request. Otherwise, the institution’s accreditation ends on the date when the time period permitting such a request expires. In such a case, the institution must complete again the entire accreditation process.

**Restoration Status.** Prior to the termination effective date established by the Commission or within seven days after completion of any requested review and appeal process, 1 whichever is later, the institution may submit a request for granting of restoration status. If, however, an institution has been granted a good cause extension to come into compliance with any standard prior to the termination action, 2 the institution may not apply for restoration status following termination.

The request for granting of restoration status must be accompanied by a completed eligibility report, demonstrating compliance with the Eligibility Requirements. Upon

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1 The other administrative remedies provided to an institution for which the Commission has acted to terminate accreditation are a Review of Commission Action in accordance with Commission policy, and an appeal heard before an Appellate Hearing Panel, in accordance with the Bylaws of the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges (ACCJC).

2 34 C.F.R. § 602.20. Under U.S. Department of Education enforcement regulations, the Commission is required to take immediate action to terminate the accreditation of an institution which is out of compliance with any standard. In the alternative, the Commission can provide the institution with additional notice and a deadline for coming into compliance that is no later than two years from when the institution was first informed of the noncompliance. In exceptional situations, if the institution has done all within its authority to reach compliance on any standard but remains out of compliance, the Commission is permitted by regulations to allocate a one-time, short-term “good cause extension” for the college to reach compliance prior to acting on the institution’s termination.
receipt of the institution’s request, the Commission shall schedule a comprehensive
evaluation of the institution no later than four months following the request. The
institution must submit an institutional self-evaluation four to six weeks prior to the
scheduled visit.

For the period leading to completion of the comprehensive evaluation for restoration
status, the termination effective date will be rescinded and the termination
implementation will be suspended. The institution’s accredited status will be
accredited, pending termination.

The comprehensive evaluation for restoration status will determine if the institution
meets all Eligibility Requirements and has demonstrated either its compliance with all of
the Accreditation Standards and Commission policies or the ability to meet them within
the two-year restoration status period. If, in the judgment of the Commission, the
institution fully meets all Eligibility Requirements and has demonstrated either its
compliance with all of the Accreditation Standards and Commission policies or the
ability to fully meet all Accreditation Standards and Commission policies within the two-
year restoration status period, the institution will be granted restoration status. If,
however, in the judgment of the Commission, the institution does not fully meet all
Eligibility Requirements and/or has not demonstrated the ability to fully meet all
Accreditation Standards and Commission policies within the two-year restoration status
period, the termination implementation will be reactivated and the effective date will
be immediate. There will be no further right to request a review or appeal in this
matter.

The Commission may determine such follow-up and special reports as may be warranted
during the restoration status. At the conclusion of the restoration status period, a
comprehensive evaluation will be conducted for the purpose of determining whether the
institution has demonstrated its compliance with Eligibility Requirements, Accreditation
Standards, and Commission policies. If, in the judgment of the Commission, the
institution is in compliance with Eligibility Requirements, Accreditation Standards, and
Commission policies, then the accredited status of the institution will be reaffirmed.
However, if in the judgment of the Commission the institution is not in compliance with
Eligibility Requirements, Accreditation Standards, and Commission policies, then the
termination implementation will be reactivated and the effective date will be
immediate. There will be no further right to request a review or appeal in this matter.

An institution may apply for restoration status only one time within a 20-year period.

Re-application for accredited status. In the event of the termination of accreditation
of an institution, the institution must complete again the entire accreditation process,
starting with the Eligibility Review and then Candidacy.
Policy on Commission Good Practice in Relations with Member Institutions

Policy
The Commission makes the commitment to follow good practices in its relations with the institutions it accredits.

Policy Elements
The Commission will fulfill its commitment by adhering to the following practices:

1. Make an initial visit to, or evaluation of, an institution only on the written request of the chief executive officer of the institution.

2. Revisit an institution only on request by the chief executive officer, or if a visit is initiated by the Commission, after due notice to the institution.

3. Permit withdrawal of a request for initial candidacy or initial accreditation at any time (even after evaluation) prior to final action by the Commission.

4. Appraise institutions in the light of their own stated purposes so long as these are within the general frame of reference of higher education and consistent with the standards of the Commission.

5. Use the institution’s Self Evaluation Report of Educational Quality and Institutional Effectiveness, the External Evaluation Report of Educational Quality and Institutional Effectiveness, and relevant qualitative and quantitative information in institutional evaluation.

6. Interpret standards for accreditation in ways that are relevant to the character of the particular institution, respecting institutional integrity and diversity.

7. Encourage sound educational innovation and continuous improvement in the educational effectiveness of the institution.

8. Publish at least twice annually in the Commission newsletter the names of institutions scheduled for comprehensive evaluation.

9. Accept relevant third-party comment on the institutions scheduled for evaluation. Such comment must be submitted in writing, signed, accompanied by return address and telephone number, and received no later than five weeks before the scheduled
Commission consideration. The Commission will notify the institution when a third-party report is received by sending a copy of the report to the institution.\(^1\)

10. Establish reporting systems for annual, midterm, and self evaluation reports which inform the Commission regarding student loan default rates and the standing of the institution with respect to appropriate state agencies, institutional or specialized accrediting agencies, and the institution’s compliance with Title IV.

11. Consider information regarding adverse actions against a member institution by another accrediting agency or state agency and provide an explanation consistent with Accreditation Standards why the action by another authority does not result in an adverse action.

12. Practice monitoring and oversight required by federal statute and regulations in the manner required by that mandate.

13. Include on evaluation teams representation from other institutions of similar purpose and academic program to the extent feasible. Include academics, administrators and and other special appointees as appropriate on evaluation teams. Include faculty members among the academic representatives on comprehensive evaluation teams.

14. Provide institutions an opportunity to object, for cause, to individual members assigned to the team designated to visit the institution, with special concern for possible conflict of interest.

15. Arrange for meetings during the comprehensive evaluation visit with administration, staff, students, and trustees, and include a publicized opportunity for an open meeting during the visit.

16. Address the standards set by the institution and institutional performance with regard to student achievement in reviews of institutional effectiveness.

17. Advise team chairs that the team report should make clear those standards with which the institution does not comply and areas needing improvement.

18. Provide to the institution a detailed written report about the institution’s performance with respect to student achievement and student learning and about its review assessing the institution’s or program’s compliance with the Eligibility Requirements, Accreditation Standards and Commission policies. Report noting findings, conclusions and recommendations in areas for which the institution has deficiencies and must take steps to meet the Eligibility Requirements, Accreditation Standards, and Commission policies. Also may include recommendations for improvement of institutional effectiveness and educational quality. Specify the period, not to exceed two years, within which the institution must resolve deficiencies in meeting standards.

\(^1\) Also refer to the Policy on Rights and Responsibilities of the Commission and Member Institutions.
19. Emphasize the value and importance of institutional self evaluation and respect the confidentiality of the institutional Self Evaluation Report and the External Evaluation Report until after the Commission has acted on them. The Commission has the responsibility to require that team members keep confidential all institutional information examined or heard before, during, and after the team visit and after the Commission acts.²

20. Encourage discussion and use on campus of major team recommendations.

21. Provide institutions due process³ concerning accrediting decisions made by the Commission: Institutions are provided an opportunity to respond in writing to draft External Evaluation Reports in order to correct errors of fact; to respond in writing (no less than 15 days in advance of the Commission meeting) to final External Evaluation Reports on issues of substance and to any Accreditation Standard deficiencies noted in the report; and to appear before the Commission to present oral comments when reports are considered.

   a. The Commission will notify the institution in writing, through an action letter, as soon as reasonably possible after Commission decisions are made and will include in its action letter the reasons for actions taken.

   b. If the Commission’s action lists any deficiency which was not noted in the External Evaluation Report, before making any decision that includes a sanction, denying or terminating accreditation, or candidacy, the Commission, through its President, will afford the institution additional time to respond in writing to the perceived deficiency before finalizing its action at the next Commission meeting. The institution may address any asserted procedural errors as well.

   c. The institution may request a review by the Commission of adverse actions, as described in the Policy on Review of Commission Actions, and may request a further appeal hearing, as described in the Bylaws of the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges, and Appeals Procedure Manual, if the nature of the action warrants an appeal.

22. Provide an opportunity for institutional representatives and the general public to attend those portions of Commission meetings devoted to policy matters and others of a non-confidential nature.

23. Will not condition candidacy or accreditation upon payment of fees which are not approved by the Commission for annual dues, evaluation costs, or other assessments.

² Also refer to the Statement on the Process for Preserving Confidentiality of Documents Related to Institutional Evaluations.
³ Complies with 34 C.F.R. § 602.18, § 602.23, § 602.25.
The purpose of this policy is to provide a process whereby individuals who have been aggrieved as a direct result of acts or omissions by the Accrediting Commission for Community and Junior Colleges (ACCJC) related to its accreditation functions may file a complaint. Complaints against the ACCJC may be about the ACCJC’s lack of compliance with its own published Eligibility Requirements, Accreditation Standards, and Commission policies, with federal regulations, and with accreditation procedures.

In order to be considered a formal complaint against the ACCJC, a complaint must involve issues broader in scope than a concern about a specific institutional action or a specific evaluation team. The ACCJC does not review complaints seeking to substitute Commission or team judgments related to institutional reviews or raise matters about which a member institution has due process procedures as a part of accreditation reviews. 1 An accreditation action not in accord with a complainant’s expectation is not in and of itself cause for review of a complaint against ACCJC. 2 The ACCJC does not review complaints presented primarily to indicate disagreement with accreditation standards, or to indicate comment concerning the accredited status of a member institution. 3

The complaint must be written, and must state clearly the nature of the complaint and the manner in which the complainant was directly aggrieved by the acts or omissions. The

1 In accordance with Commission policies, the institution through its Chief Executive Officer is provided the opportunity to challenge the appointment of any evaluation team member for cause, and to provide an evaluation of the team chair and team visit to the Commission following an on-site visit. The institution also is provided the opportunity to review draft team reports for errors or omission of fact, to provide comment or supplemental information following receipt of the final team report, and to present oral comment at the Commission meeting during which the institution is being reviewed. In the event of an adverse action (denial or termination of accredited status), the institution may request a review by the Commission of its action, and then may appeal the adverse action.

2 In accordance with the Commission’s Policy on Public Disclosure and Confidentiality in the Accreditation Process, the institution’s CEO is required to notify the campus community about accreditation activities and participation in them, about submission of third party comments, and about providing input related to the review of the institution’s accredited status. In accordance with the Policy on the Role of Accreditation Liaison Officers, the ALO is appointed by the institution’s CEO and is responsible to communicate information about accreditation and institutional quality to the constituencies at the college and to facilitate communications related to the institution’s external evaluations. College constituents and interested members of the public are encouraged to follow institutional procedures for providing information or complaints related to the institution’s accreditation review.

3 Please refer to the forms and formats for Third Party Comment, Complaints Against Member Institutions, and for submitting comment on policies and standards (Policy on Review of Accreditation Standards) for these kinds of communication.
complainant must be clearly identified and the complaint must contain an original signature. The complaint must identify the Eligibility Requirements, Accreditation Standard, Commission policy, or procedure in question and include substantial evidence to support the allegations being made. Should a complaint require Commission consideration and action, the complainant will be notified of the timing of the Commission’s review.

Except in extraordinary circumstances, the ACCJC does not consider complaints if the concern alleged occurred more than three years prior to filing the complaint. The ACCJC may elect to consider complaints together if they concern the same circumstances, complainants, or period of time. The ACCJC does not accept amendments to a complaint.

The President, on behalf of the ACCJC, responds to each complaint made against the ACCJC within 30 days of receipt of the complaint (if more time than this is required to complete an investigation, the complainant is notified within the initial 30 days); implements corrective action where appropriate or makes recommendations to the Commission to implement the corrections; reports the nature and disposition of any complaints to the Chair of the Commission; and compiles annually a list, available to the public on request, which summarizes the nature and disposition of any such complaints. Upon advice of counsel, the ACCJC retains the right to withhold public disclosure of information if potential legal action is involved in the complaint.

If a complaint filed against the ACCJC under the provisions of this section is not resolved by the President, or if the President is a direct subject of the complaint, the Commission Chair shall designate one or more persons to review the handling of the complaint. The Commission shall review the report of the designated reviewer(s) and shall notify the complainant and the President of its response.

The ACCJC’s disposition of complaints under this policy is final. Complainants do not have a right to appeal the disposition of a complaint.
Background
Title IV of the Higher Education Act 1965, as amended (34 C.F.R. § 668(o).), enables eligible students with intellectual disabilities to receive Federal Pell Grants, Supplemental Education Opportunity Grants and Work-Study funds, if they are enrolled in a comprehensive transition and postsecondary program for students with intellectual disabilities (CTP programs). Institutions must be participating in federal student financial aid programs for their CTP programs to be eligible for federal student aid programs.

Policy
An accredited institution which offers a CTP program and applies to have the program participate in Title IV must notify the Commission of its CTP program. The notice must include the institution’s response documenting how it meets the regulatory requirements regarding a CTP program. Information about the CTP program must be included in the Self Evaluation Report of Educational Quality and Institutional Effectiveness at the time of the educational quality and institutional effectiveness review.

Policy Elements
The notice that institutions are required to submit to the Commission regarding a CTP program must include information about how the program meets the regulatory requirements as listed below.

1. The CTP program must:
   (a) be delivered to students physically attending the institution;
   (b) be designed to support students with intellectual disabilities who are seeking to continue academic, career and technical, and independent living instruction at an institution of higher education in order to prepare for gainful employment;
   (c) include an advising and curriculum structure;
   (d) require students with intellectual disabilities to have at least one-half of their participation in the program, as determined by the institution, focus on academic components through one or more of the following activities:
      i. taking credit-bearing courses with students without disabilities
      ii. auditing or otherwise participating in courses with students without disabilities for which the student does not receive regular academic credit
      iii. taking non-credit-bearing, non-degree courses with students without disabilities
      iv. participating in internships or work-based training in settings with individuals without disabilities; and
(e) provide students with intellectual disabilities opportunities to participate in coursework and other activities with students without disabilities.

The institutions must also provide:

2. its policy for determining whether a student enrolled in the program is making satisfactory academic progress;

3. information about the number of weeks of instructional time and the number of semester or quarter credit hours or clock hours in the program, including the equivalent credit or clock hours associated with non-credit or reduced credit courses or activities;

4. a description of the educational credential offered (e.g., degree or certificate) or identified outcome or outcomes established by the institution for all students enrolled in the program.
Policy on Contractual Relationships with Non-Regionally Accredited Organizations
(Adopted March 1973; Revised June 2003, January 2012; Edited August 2012)

Background
Institutions may contract responsibilities for programs and services, such as recruitment, admission, student support, on-line support, instructional curriculum materials, and student authentication processes to non-regionally accredited organizations (‘Related Entities’). An institution accredited by the Commission is responsible for ensuring the quality and integrity of all activities conducted in its name, including activities contracted to related entities. This policy is intended to ensure that the Commission receives appropriate assurances and sufficient information and documentation to assure whether such institutions comply with the Eligibility Requirements, Accreditation Standards, and Commission policies.

A related entity may be a corporate agent, system administrator or board, religious sponsor, funding sponsor (which, in some cases, may include an equity or investment fund), or other entity that can affect decisions related to accreditation. Related entities may also include institutions or corporate layers or groups. Ordinarily, local, county, and state legislatures, other accreditors, local advisory boards, and government agencies are not related entities.

Policy
When an institution contracts certain functions to a related entity, the institution is responsible to the Commission for presenting, explaining, and evaluating all significant matters and relationships involving related entities that may affect accreditation requirements and decisions at the time of eligibility review, candidacy review, initial accreditation, educational quality and institutional effectiveness review, follow-up and special reports, and all other times deemed relevant by the Commission. Although a related entity may affect an institution’s ongoing compliance with the Accreditation Standards, the Commission will review and hold responsible only the applicant, candidate, or accredited institution for compliance with the Accreditation Standards. The Commission will protect the confidential nature of all information submitted by the institutions or by related entities except as otherwise required by law or other Commission policies.

If an institution is part of a district/system with shared facilities or processes (e.g., library) or centralized information (e.g., strategic plan), the institution may use documents prepared by the district/system in its report to the Commission.

The accredited institution’s obligation to report any changes in control, legal status or ownership through its substantive change process also applies to related entities.
Guidelines for Good Practice in Contracting with Non-Regionally Accredited Organizations

The Contract should:

1. be executed only by duly designated officers of the institution and their counterparts in the related entity. While other faculty and administrative representatives will undoubtedly be involved in the contract negotiations, care should be taken to avoid implied or apparent power to execute the contract by unauthorized personnel.

2. establish a definite understanding between the institution and the related entity regarding the work to be performed, the period of the agreement, and the conditions under which any possible renewal or renegotiation of the contract would take place.

3. clearly vest the ultimate responsibility for the quality and academic integrity of the performance of the necessary control functions for the educational offering with the accredited institution granting credit for the offering. Such performance responsibility by the credit-granting institution would minimally consist of adequate provision for review and approval of work performed in each functional area by the related entity, and provisions for ending the contract if the work performed does not meet the institution’s requirements, which should include adherence to all the Eligibility Requirements, Accreditation Standards, Commission policies, federal laws and regulations.

4. at a minimum, clearly establish the responsibilities of the institution and the related entity regarding:
   a. Indirect Costs  
   b. Approval of Salaries  
   c. Equipment  
   d. Subcontracts and Travel  
   e. Property ownership and Accountability  
   f. Inventions and Patents  
   g. Publications and Copyrights  
   h. Accounting Records and Audits  
   i. Security  
   j. Termination Costs  
   k. Tuition Refund  
   l. Student Records  
   m. Faculty Facilities  
   n. Safety Regulations  
   o. Insurance Coverage

5. be formally reviewed by the Commission’s Committee on Substantive Change prior to execution if in the contractual relationship, more than 25% of one or more of the accredited institution’s educational programs is to be offered by the non-regionally accredited organization (34 C.F.R. 34 § 602.22(2)(vii)).
Policy on Direct Assessment of Learning

Background

The growing complexity of policies and practices for transfer and award of credit has been brought about, in part, by the changing nature of postsecondary education. With increasing frequency, students are pursuing their education in a variety of institutional and extra-institutional settings. Policies on transfer and award of credit should encompass educational accomplishment attained in extra-institutional settings.

Most programs which provide students with the means to acquire knowledge and skills at an individual pace and then to demonstrate achievement of specific competencies to apply toward a course, certificate or degree, do so by clock hour or credit awards. However, an increasing number of programs provide for award of certificate or degree by direct assessment of student learning.

Transfer and award of credit is a concept that increasingly involves transfer between dissimilar institutions and curricula and recognition of extra-institutional learning, as well as transfer between institutions and curricula with similar characteristics. As their personal circumstances and educational objectives change, students seek to have their learning, wherever and however attained, recognized by institutions where they enroll for further study. It is important for institutions to develop reasonable and definitive policies and procedures for acceptance of such learning experiences, as well as for the transfer of credits earned at another institution. Such policies and procedures should provide consideration for the individual student who has changed institutions or objectives. It is the receiving institution’s responsibility to provide reasonable and definitive policies and procedures for determining a student’s knowledge in required subject areas. Institutions also have a responsibility to advise the student that the work reflected on the transcript may or may not be accepted by a receiving institution as bearing the same (or any) credits as those awarded by the provider.

1 The background information comes from the Joint Statement on the Transfer and Award of Credit, initially created in 1978, and revised in 2001. The three signatories are national associations whose member institutions are directly involved in the transfer and award of academic credit: the American Association of Collegiate Registrars and Admissions Officers, the American Council on Education, and the Council for Higher Education Accreditation. Information from the March 19, 2013 Dear Colleague letter of the U.S. Department of Education on applying for Title IV eligibility for direct assessment (competency-based) programs is also included.

2 The U.S. Department of Education has clarified that programs of this nature may be approved for award of Federal Student Assistance (FSA), using an equivalency calculation of clock hours or credits to determine the basis for payment and award of FSA. However, FSA may be awarded only for learning overseen by the institution. Pre-collegiate coursework and preparatory coursework required for entry into a certificate or degree program do not qualify for FSA if they involve direct assessment of learning.
The basic principle is that each institution is responsible for determining its own policies and practices with regard to the transfer, acceptance, and award of credit. Institutions are encouraged to review their policies and practices periodically to assure that they accomplish the institutions’ objectives and that they function in a manner that is fair and equitable to all students. The institution’s articulation and transfer procedures should evaluate courses, programs and other learning experiences on their learning outcomes, and the existence of valid measures for assessing learning.

Policy
The Commission is committed to excellence and integrity in credits, certificates and degrees awarded by member institutions. Institutional policies and procedures must outline the process and standards by which direct assessment of learning is conducted and credits, certificates, and degrees are awarded.

Policy Elements
Assessing Learning
In making the determination whether to award college credits, certificates, and degrees to students for prior learning:

1. Credit or its equivalent should be awarded only for learning, and not for experience.
2. Assessment should be based on standards and criteria for the level of acceptable learning that are published.
3. Assessment should be treated as an integral part of learning, not separate from it, and should be based on an understanding of learning processes.
4. The determination of credit awards and competence levels must be made by appropriate subject matter and academic or credentialing experts.
5. Credit or other credentialing should be appropriate to the context in which it is awarded and accepted.
6. If awards are for credit, transcript entries should clearly describe what learning is being recognized and should be monitored to avoid giving credit twice for the same learning.
7. Policies, procedures, and criteria applied to assessment, including provision for appeal, should be fully disclosed and prominently available to all parties involved in the assessment process.
8. All personnel involved in the assessment of learning should pursue and receive adequate training and continuing professional development for the functions they perform.
9. Assessment programs should be regularly monitored, reviewed, evaluated, and revised as needed for currency.

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Selection of Evaluators

Faculty members who conduct the evaluation of prior learning experience exercise professional judgment and competency in applying the evaluative criteria and procedures. Faculty who are involved in evaluating prior learning should have the data necessary to determine the skills, competencies, and knowledge held by the candidate for direct assessment of learning, including position descriptions, outlines of training programs completed, and records of examinations taken, if any; and the means to compare the demonstrated learning with the learning outcomes acquired by students who have completed the related course or curriculum.

4 Refer to the guides for the evaluation of educational experiences, Center for Adult Learning and Educational Credentials, American Council on Education (ACE), Washington, DC.
Policy on Distance Education and on Correspondence Education

Background
Recognizing that most accredited institutions are making use of the growing range of modalities for delivery of instructional and educational programs and services, including various electronic means, the Commission has adopted a policy based on principles of good practice to help ensure that distance learning is characterized by the same expectations for quality, integrity, and effectiveness that apply to more traditional modes of instruction.

This policy reflects the federal regulatory requirements regarding distance education and correspondence education.

Definition of Distance Education
Distance Education means (34 C.F.R. § 602.3.):

Education that uses one or more of the technologies listed in paragraphs (1) through (4) to deliver instruction to students who are separated from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies may include:

1. the internet;
2. one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;
3. audioconferencing; or
4. video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3).

Definition of Correspondence Education
Correspondence education means (34 C.F.R. § 602.3.):

1. education provided through one or more courses by an institution under which the institution provides instructional materials, by mail or electronic transmission, including examinations on the materials, to students who are separated from the instructor.
2. interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student.
3. correspondence courses are typically self-paced.
4. correspondence education is not distance education.
Policy

Commission policy specifies that all learning opportunities provided by accredited institutions must have equivalent quality, accountability, and focus on student outcomes, regardless of mode of delivery. This policy provides a framework that allows institutions the flexibility to adapt their delivery modes to the emerging needs of students and society while maintaining quality. Any institution offering courses and programs through distance education or correspondence education is expected to meet the requirements of accreditation in each of its courses and programs and at each of its sites.

Policy Elements

• development, implementation, and evaluation of all courses and programs, including those offered via distance education or correspondence education, must take place within the institution’s total educational mission.

• institutions are expected to control development, implementation, and evaluation of all courses and programs offered in their names, including those offered via distance education or correspondence education.

• institutions are expected to have clearly defined and appropriate student learning outcomes for all courses and programs, including those delivered through distance education or correspondence education.

• institutions are expected to provide the resources and structure needed to accomplish these outcomes and to demonstrate that their students achieve these outcomes through application of appropriate assessment.

• institutions are expected to provide the Commission advance notice of intent to initiate a new delivery mode, such as distance education or correspondence education, through the substantive change process.

• institutions are expected to provide the Commission advance notice of intent to offer a program, degree or certificate in which 50% or more of the courses are via distance education or correspondence education, through the substantive change process. For purposes of this requirement, the institution is responsible for calculating the percentage of courses that may be offered through distance or correspondence education.

• institutions which offer distance education or correspondence education must have processes in place through which the institution establishes that the student who registers in a distance education or correspondence course or program is the same person who participates every time in and completes the course or program and receives the academic credit. This requirement will be met if the institution verifies the identity of a student who participates in class or coursework by using, at the institution’s discretion, such methods as a secure log-in and password, proctored examinations, other technologies and/or practices that are developed and effective in verifying each student’s identification. The institution must also publish policies that ensure the protection of student privacy and will notify students at the time of class registration of any charges associated with verification of student identity. 34 C.F.R. § 602.17(g).

1 See Addendum: WCET Best Practice Strategies to Promote Academic Integrity in Online Education Version 2.0, June 2009.
This list of best practice strategies is based on "Institutional Policies/Practices and Course Design Strategies to Promote Academic Integrity in Online Education," produced by WCET in February 2009 and updated in April 2009. In May 2009, the Instructional Technology Council (ITC) surveyed its membership to invite feedback and additional strategies to enhance the WCET work. This June 2009 document reflects the combined contributions of WCET, the UT TeleCampus of the University of Texas System, and ITC. This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 United States license.

INSTITUTIONAL CONTEXT AND COMMITMENT

1. Establish a campus-wide policy on academic integrity that articulates faculty and student responsibilities.

2. Demonstrate an institutional commitment to enforcing the policy and in supporting faculty and staff in the handling of academic integrity matters.

3. Make information on academic integrity easy to find on the campus Web site, library Web site, department Web site, course, within the syllabus and within specific assignments.

4. Include ethics instruction within the core curriculum and/or area-specific within degree plans.

5. Address academic integrity at student orientation programs and events.

6. Encourage faculty to report every suspected violation and act upon it.

7. Secure student logins and password to access online courses and related resources, discussions, assignments and assessments.

CURRICULUM AND INSTRUCTION

1. State the academic integrity/academic honesty policy within the online learning environment and discuss it early in the course.

2. Require student engagement with the academic integrity policy. For example:
   a. Ask students for their input on how to create a community of integrity at the start of the course. This establishes the students as stakeholders in the community and the process of its formation.
   b. Develop and ask students to commit to a class honor code.
   c. Require students to read and sign an agreement to the campus academic integrity policy.
   d. Write a letter to students about integrity and post it in the course.
   e. Ask students to restate the academic integrity policy (this can also be used as a writing sample to use when grading and reviewing student work).
   f. Ask students to reflect on the academic integrity policy in the discussion board.
   g. Include a lesson on avoiding plagiarism.

3. Have assignments and activities in which appropriate sharing and collaboration is essential to successful completion. Foster a community of integrity by choosing authentic learning tasks that require group cohesion and effort. For example, focus assignments on distinctive, individual, and non-duplicative tasks or on what individual students self-identify as their personal learning needs.

4. Provide students with a course or course lesson on research and/or study skills. Work with library staff to design assignments and prepare materials on plagiarism and research techniques.
Policy on Distance Education and on Correspondence Education

5. Include a statement that the instructor reserves the right to require alternative forms and/or locations of assessments (e.g., proctoring).
6. Ask students to follow-up questions to assignments such as, “expand upon this statement you made,” “tell me why you chose this phrase, description or reference,” and “expand upon the ideas behind this reference.”
7. Select one or two difficult concepts from the paper and ask the student to restate/rewrite the information.
8. Require students to share key learning from references for a paper or self-reflection on an assignment in the discussion board.
9. Include an ethical decision-making case study within the course.

FACULTY SUPPORT

1. Incorporate academic integrity strategies into professional development and faculty training offerings.
2. Publish academic integrity strategies and policies in faculty handbook and Web-based faculty resources.
3. Publish guidelines for handling/reporting individual student infractions.
4. Assign a department academic integrity liaison to support faculty.
5. Use a plagiarism detection service.
6. Use Google to search for a unique text string or unique phrase from the paper.
7. Keep student papers filed in the department by topic for reference.

STUDENT SUPPORT

1. Define academic integrity and cheating and clearly explain what is considered dishonest and unacceptable behavior.
2. Provide information and examples to help students understand the difference between collaboration on assignments and cheating, and identify plagiarism. Teach the proper use of citations.
3. State how much collaboration is permissible on each assignment.
4. State what the instructor’s expectations are for the students and explain what they should expect from the instructor. For example:

a. Include a statement in the syllabus encouraging honest work.
b. Repeat the campus academic integrity statement and provide a link to campus policies.
c. Describe academic dishonesty.
d. Describe the repercussions for academic dishonesty.
e. Describe permissible and impermissible collaboration.
f. Include outside links to information on plagiarism, self-tests and examples.
g. Include information on acceptable sources.
h. Include information about the college’s writing center, library or other support.
5. Provide a writing style sheet or handbook with information on plagiarism and campus policies.
6. Indicate assessments may require follow-up documentation, questions or assignments.
7. State expectations for the time needed to complete coursework.
8. State whether the instructor/college will be using a plagiarism detection service.

ASSESSMENT AND EVALUATION

1. Provide rubrics or detailed grading criteria for every assignment at the beginning of the course so students understand how they will be graded.
2. Train faculty on ways to use the settings on the college’s learning management system to reduce cheating:
   a. Use a test bank with more questions than will be used on any particular test and have the learning management system pull a smaller number of questions from the test bank.
   b. Randomize the order of answers for multiple test questions so, for example, the correct answer for a particular question might be “a” for one student and “b” for another.
   c. Require forced completion on exams so students cannot re-enter a test.
   d. Set a short window for testing completion, i.e., one or two days to take an exam rather than a whole week. Setting a completion time reduces a student’s ability to access the test, look up the answer, and re-enter the test.

1The ACCJC recommends the use of any appropriate search engine.
Most test-taking software applications keep track of time on the server, not on the student's computer.

e. Password protect exams.

f. Show questions one at a time (makes more difficult for students to copy and paste the test in order to give it to someone else).

g. Use a Web browser lock-down service during testing.

h. Check the computer "properties" for the "creation date" and "author" for essay or term paper submissions if students are suspected of submitting work created by someone else.

3. Clarify that students with disabilities and requesting testing accommodations (extended time for completion of examinations and quizzes) must identify themselves to the college's office of disabilities and provide appropriate documentation.

4. Change test items and assignment topics each semester.

5. Emphasize assignments that require written work and problem solving (e.g., essays, papers, online discussions).

6. Use a variety of assessment strategies (quizzes, short and long papers, test questions that require the application of a theory or concept).

7. Adopt the following practices to encourage authentic written work:

a. Require students to turn in copies of reference articles with cited text highlighted.

b. Require annotated bibliographies.

c. Do not allow last minute changes in assignment topics.

d. Require specific references be used (this might be the course text).

e. Require an abstract.

f. Give narrow assignment topics (tied into class experience) and require thesis statements prior to topic approval.

g. Require students to turn in a draft, and their bibliography or references prior to the paper's due date.

h. Require students to write a concept paper and project plan prior to completing an assignment.

8. Evaluate the research process and the product.

9. After an assignment is due, have students post in the discussion board, describing the assignment and the research method used, a summary of conclusions and an abstract (a meta-learning essay).

10. When evaluating student written work, consider following these practices:

a. Be wary of student writing that reads like an encyclopedia, newspaper article or expert in the field.

b. Look for whether a paper reflects the assignment, has changes in tense, includes odd sentences within a well-written paper, is based on references older than three years, refers to past events as current, or uses jargon.

c. Compare student writing on the discussion board with that on assignments and papers. A writing sample collected at the start of the semester can be helpful.

d. Compare the writing at the beginning and end of the paper with that in the middle of the paper -- language, sentence length and reading level.

e. Check references; compare quotations with cited sources; look for the same author in multiple references.

f. Read all papers on the same topic together.

11. Make assignments cumulative (students turn in parts of a project or paper throughout the semester).


13. Other than grades, do not provide students feedback on tests until all of the students in the class have completed them.

14. Use proctored test sites where appropriate.

15. Faculty should use a robust user name and password to protect their computer-based grade book and keep a printed copy in a secure place in case students are able to hack into the computer system.
SOURCES

“101 Ways to Maintain Academic Integrity in an Online Course,” by Michael Anderson and Lori McNabb, UT TeleCampus, The University of Texas System. Handout for faculty development program.


WCET Survey on Academic Integrity and Student Verification, August 2009.


Instructional Technology Council Survey on Best Practice Strategies to Promote Academic Integrity in Online Education, May 2009.
How an institution deals with diversity is an important indicator of its integrity and effectiveness. Institutions accredited by the Commission consider diversity issues in a thorough and professional manner. Every institution affiliated with the Commission is expected to provide and sustain an environment in which all persons in the college community can interact on a basis of accepting differences, respecting each individual, and valuing diversity. Each institution is responsible for assessing the quality and diversity of its campus environment and for demonstrating how diversity is served by the goals and mission of the college and district. In addition, institutions must identify the processes that actively promote diversity in the everyday environment and the academic programs of the college. Accreditation teams will evaluate the condition of institutional diversity during the site visits and include findings and recommendations in written reports to the Accrediting Commission.

The Commission Statement on Diversity is designed to guide institutions and evaluation teams in the self evaluation and site visit process and to indicate how institution-wide reviews of issues of diversity should be documented in the self evaluation and visiting team reports. The Accrediting Commission, taking into account the mission of the institution and the entirety of the self evaluation and peer review processes, will evaluate the institution’s effectiveness in addressing issues of diversity.
Policy on Evaluation of Institutions in Multi-College/Multi-Unit Districts or Systems


Background
Almost half of the member institutions are part of larger systems, either by being part of a multi-college district/system or by being owned by a larger corporate entity. Institutions must work closely with the district/system to ensure that Eligibility Requirements, Accreditation Standards, and Commission policies are met and quality is sustained. The district/system’s role is to facilitate and support the successful implementation of the institutional mission and institutional effectiveness. This necessitates dialogue between the institutions and district/system and among the institutions within the district/system.

The Commission evaluates based on the Accreditation Standards regardless of organizational structure. In single-college districts/systems all functions are carried out by the same entity. For multi-college districts/systems, key functions that relate to the Accreditation Standards may be distributed among the institutions and the district/system in various patterns. In order for the Commission to evaluate institutions in single-college and multi-college organizations fairly, institutions must inform the Commission about their functional organization and involve district/system and college personnel responsible for the functions in accreditation activities.

The integrity of the district/system programs and services falls within the scope of the institution’s accreditation. The district/system auxiliary programs and services are subject to review if the program or service is executed in the name of the district/system or institution, or if the district/system administers or the board authorizes the program or service. The delineation and distribution of responsibilities among the district/system and the institution must be articulated clearly.

Policy
The Commission assures the equitable evaluation of all institutions regardless of organizational structure and clarifies the Commission’s expectations regarding the conduct and outcomes of comprehensive institutional evaluations and other reviews in multi-college districts/systems.

Policy Elements
1. While the Commission accredits individual institutions, the district/system holds a fundamental role and responsibility in the analysis and evaluation of district/system structures and how these structures assist the institutions to achieve and adhere to all the Eligibility Requirements, Accreditation Standards, and Commission policies and gain and sustain accredited status.
2. Institutions have the responsibility to describe and delineate clearly the particular way functions are distributed in their unique multi-college organization. The distribution of these functions is to be evaluated. There must be evidence of ongoing communication between the institution and the district/system regarding the distribution of these functions. The Commission will use this evidence to identify the locus of responsibility for the institution’s ability to meet Eligibility Requirements, Accreditation Standards, and Commission policies.

3. When serious inadequacies in a district/system function are verified, such deficiencies may jeopardize the accreditation of one, some, or all of the district/system institutions. Both the district/system and the impacted institution(s) are responsible for correcting the identified deficiencies.

4. The Commission reserves the right to initiate direct interaction with district/system chief executive officers regarding the ability of institutions to demonstrate that they meet or exceed the Accreditation Standards. When district/system officers are contacted regarding an institution, the institution(s) will receive the same communication.

5. A district/system may make a special request to evaluate the effectiveness of its central functions in conjunction with scheduled educational quality and institutional effectiveness reviews. This activity is limited to issues related to the ability of institutions to demonstrate that they meet or exceed the Accreditation Standards. The outcome of this activity does not result in any “accredited” status for the district/system.

Procedures for the Evaluation of Institutions in Multi-College/Multi-Unit Districts or Systems

A. Institutional Self Evaluation
   1. As part of the institutional self evaluation process and in consultation with the district/system, the institution must specify through an organizational “map,” which is a description of the delineation of district/system and college functions, whether the institution or district level holds the primary responsibility for all or parts of a specific function.

   Moreover, the Commission recognizes that institutions in a multi-college system may have lateral relationships with other institutions in the district/system which should be included in the map. For example, police services may be a district/system service for all institutions in a multi-college district/system, yet located at one institution in the district/system.

   2. Individuals responsible for key functions of the district/system must be actively involved with the institution in developing the Self Evaluation Report of Educational Quality and Institutional Effectiveness. The level of involvement will be based upon who has responsibility for the institutional function(s) addressed in the Accreditation Standards. Close cooperation between and among the institutions and the district/system office is expected as a part of the preparation of the Institutional Self Evaluation Report.
3. In the Institutional Self Evaluation Report, institutions are expected to include a discussion of how the identified district/system functions and decisions affect the institutions’ ability to meet Eligibility Requirements, Accreditation Standards and Commission policies. For example, the governing board’s role in adopting the institutional mission statement is addressed in the Standard dealing with mission; the district/system office responsibility for human resources is discussed in the Standard pertaining to faculty and staff; the district/system financial allocation system should be included in the Standard in which financial resources are addressed. The organizational map will provide guidance for this discussion. The effectiveness of the map’s delineation of functions includes analysis, evaluation, and subsequent planning for organizational improvement.

4. The district/system chief executive officer and governing board are expected to be involved in the process of developing the Institutional Self Evaluation Report. The governing board must review the final Institutional Self Evaluation Report and certify its involvement in the institutional self evaluation process.

B. Evaluation Team Composition

Just as for institutions in single-college districts, evaluation team composition for institutions in multi-college districts/systems is shaped by the institution being accredited. Evaluation teams visiting institutions in multi-college districts/systems will have the range of expertise appropriate for the institution and also individuals with multi-college district/system perspectives.

C. District/System Evaluation Team Visit Organization

The Commission organizes site visits to institutions in multi-college districts/systems simultaneously or in clusters of institutions.

Prior to simultaneous site visits taking place in the institutions of a district/system, the Commission President will name a coordinating chair. This coordinating chair, in consultation with institutional evaluation team chairs, will form a small district/system evaluation team which may be drawn from all of the evaluation teams visiting the institutions. The system evaluation team may consist of evaluation team chairs and such members of the respective evaluation teams as are needed to address the district/system issues identified in the Institutional Self Evaluation Reports and by the evaluation teams.

The purposes of the coordinating chair and district/system evaluation team are to:

- evaluate the evidence provided in the Institutional Self Evaluation Report to confirm that the functions provided by the district/system enable the institutions to meet the Eligibility Requirements, Accreditation Standards, and Commission policies,
- identify issues pertaining to the Standards that are related to district/system functions,
- ensure commonality and comparability of evaluation team recommendations across External Evaluation Reports when accreditation issues have district/system implications, and
- support the work of the teams evaluating each institution.
This evaluation team will meet with the district/system administration before the site visit to discuss prior district recommendations and will review evidence to evaluate adherence to the Eligibility Requirements, Accreditation Standards, and Commission policies.

The coordinating chair may have a separate evaluation team assistant available to him/her solely for the purpose of supporting the district/system evaluation team and for performing organizational tasks related to this part of the evaluation visits. Evaluation team chairs on the special district/system evaluation team will receive the Institutional Self Evaluation Reports, the previous External Evaluation Reports, and Commission action letters from every institution involved and will make the materials available to institutional evaluation team members on the district/system evaluation team.

D. Reports by the Institutional Evaluation Teams and the District/System Evaluation Team

The district/system evaluation team will develop conclusions about any major issues pertaining to the district/system. Recognizing that some district/system observations may pertain to all institutions, and others only to particular institutions, the institutional evaluation team chair, working in conjunction with the coordinating chair and the members of the district/system evaluation team, will incorporate appropriate conclusions within the Accreditation Standards in the individual institutional External Evaluation Reports of Educational Quality and Institutional Effectiveness. When the district/system evaluation team determines that one or more recommendation(s) pertaining to the district/system as a whole is in order, then the same recommendation(s) will appear in each of the institutions’ External Evaluation Reports.

At the end of each site visit, the evaluation team chair meets with the college chief executive officer to discuss major findings. The evaluation team chair will then make a presentation of the evaluation process and findings at a meeting open to the entire college community. The coordinating chair shall meet with the district/system chief executive officer and if possible with the college chief executive officers to present district/system findings. This discussion is limited to the district/system functions identified in the organizational map and the issues related to them which are identified in the Institutional Self Evaluation Reports and the findings of the institutional evaluation teams.

E. Commission Actions and Public Disclosure

The Commission will receive the following items from each institution in preparation for Commission action: the Institutional Self Evaluation Report, the Institutional External Evaluation Report, the catalog, and other pertinent documents. The Commission will consider each institution separately in relation to the district/system and take the appropriate action for each institution.

The Commission will discuss the district/system and develop a consensus on any matters to be communicated to the district/system Chief Executive Officer. In its action letters to the institutions, the Commission will comment on important district/system matters that significantly enhance or impinge on institutional quality.
In a case where one or more accreditation concerns, relating to the district/system are identified, the Commission may request a written response from the district/system itself and may also specify a site visit, by Commission representatives, to evaluate any such response.

The Commission will make clear that significant inadequacies in district/system functions can jeopardize the accreditation of one, some, or all of the district/system institutions. When correspondence is sent to the district/system Chief Executive Officer, copies will be sent to the Chief Executive Officer of the appropriate institution(s).

Should the Commission decide that a district/system response and site visit are in order, the district/system evaluation team will normally include the coordinating chair, a member of the Commission, and additional persons with special expertise, as needed. The purpose of the site visit is to evaluate the response from the district/system. This response could be the basis for subsequent Commission action, relative to the accredited status of one or more of the institutions in the district/system.

F. Follow-up Activities
The district/system Chief Executive Officer is required to share the External Evaluation Report and Commission action letter of any site visit related to district/system functions with the governing board and appropriate staff at the district/system and at the institutions.

The Commission may issue special communications to college Chief Executive Officers on particular leadership issues. When the institution involved is a member of a district/system, the district/system Chief Executive Officer will be copied on this correspondence.

G. Cost
The costs associated with the additional activities of a district/system site visit may be billed directly to the district/system involved on an actual cost basis.
Policy on Governing Boards for Military Institutions
(Adopted June 2009)

Background
The Accreditation Standards and Eligibility Requirements require that colleges have a functioning governing board responsible for the quality, integrity, and financial stability of the institution and insure that the mission is carried-out.

Policy
A military institution, with a chain of command structure, authorized and operated by the federal government and which awards degrees has a public board or steering committee. Neither the presiding officer nor a majority of the other members are civilian employees of the military/Department of Defense or active/retired military. Members should represent diverse backgrounds and experiences in which neither the presiding officer nor a majority of the other members are civilian employees of the military/Department of Defense or active/retired military. The board has broad and significant responsibilities to recommend policy, identify the educational, personnel, and financial requirements of the institution, and validates the assignment of the chief executive officer designated as the commander or commandant of the institution.

The presiding officer and a majority of the members have no contractual, employment, or personal or familial financial interest in the institution.
Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status

(Adopted January 2005; Revised January 2012)

Background

The Eligibility Requirements, Accreditation Standards, and this Commission policy require that an accredited institution make available to students and prospective students clear and accurate information about itself in all publications that may be disseminated in the name of the institution.

According to federal regulations, the U.S. Department of Education may limit or revoke the institution’s eligibility to participate in Title IV, if an institution or any individual representing an institution makes false, erroneous or misleading statements, including statements about an institution’s accredited status (34 C.F.R. § 668.71. Misrepresentation).

Policy

All accredited institutions, or individuals acting on their behalf, must exhibit integrity and responsibility in advertising, student recruitment, and representation of accredited status. Responsible self-regulation requires rigorous attention to principles of good practice.

Policy Elements

A. Advertising, Publications, Promotional Literature

Educational programs and services offered shall be the primary emphasis of all advertisements, publications, promotional literature and recruitment activities, including those presented in electronic formats. All statements and representations, including, but not limited to, conditions for transfer of course credits, conditions for acceptance of course credits, requirements for course completion and licensure examinations, shall be clear, factually accurate, and current. Supporting documentation should be kept on file and readily available for review.

Catalogs and other official publications shall be readily available and accurately depict:

- official name, address(es), telephone number(s), and website address of the institution;
- institutional mission statement, purposes, and objectives; entrance requirements and procedures;
- basic information on programs and courses with required sequences and frequency of course offerings explicitly stated;
- degree, certificate, and program completion requirements, including length of time required to obtain a degree or certificate;
- faculty with degrees held and the conferring institution;
- institutional facilities readily available for educational use;
• rules and regulations for conduct;
• the institution’s academic freedom statement;
• tuition, fees, and other program costs;
• opportunities and requirements for financial aid;
• policies and procedures for refunding fees and charges to students who withdraw from enrollment¹;
• policies related to the transfer of credits from other institutions;
• statements of nondiscrimination;
• location or publications where other institutional policies may be found;
• members of the Governing Board; and
• the accredited status of the institution, including any specialized or program accreditation that may be required for licensure or employment in the field, or the lack thereof.

In institutional catalogs and/or official publications describing career opportunities, clear and accurate information shall be provided on: national and/or state legal requirements for eligibility for licensure or entry into an occupation or profession for which education and training are offered; and any unique requirements for career path or for employment and advancement opportunities in the profession or occupation described.

B. Student Recruitment for Admissions

Student recruitment shall be guided by well-qualified admissions officers and trained volunteers whose credentials, purposes, and position or affiliation with the institution are clearly specified. Independent contractors or agents used by the institution for recruiting purposes shall be governed by the same principles as institutional admissions officers and volunteers.

The following practices in student recruitment shall be scrupulously avoided:
• assuring employment unless employment arrangements have been made and can be verified;
• misrepresenting job placement and employment opportunities for graduates; misrepresenting program costs; misrepresenting abilities required to complete intended program;
• offering to agencies or individual persons money or inducements other than educational services of the institution in exchange for student enrollment.

Awards of privately endowed restricted funds, grants or scholarships are to be offered only on the basis of specific criteria related to merit or financial need.

¹ See Policy Guidelines for Refund of Student Charges
C. **Representation of ACCJC Accredited Status**

The term “accreditation” is to be used only when accredited status is conferred by the Commission. Specialized and program accreditation granted by other accreditors should be clearly specified as to the source of the accreditation together with reference to the specific program to which it applies.

No statement shall be made about possible future accreditation status or qualification not yet conferred by the Commission. Statements like the following are not permissible: “(Name of Institution) has applied for candidacy with the ACCJC”; “The _________ program is being evaluated by ACCJC, and it is anticipated that accreditation will be granted in the near future.” The phrase “fully accredited” shall be avoided, since no partial accreditation is possible from the Commission.

When accredited status is affirmed in institutional catalogs and other official publications, it shall be stated accurately and fully in a comprehensive statement, which identifies the accrediting body by name in the manner required by the accrediting body.

The accredited status of a program shall not be misrepresented. The accreditation granted by the Commission has reference to the quality of the institution as a whole. Since institutional accreditation does not imply specific accreditation of any particular program in the institution, statements like “this program is accredited” or “this degree is accredited,” are incorrect and misleading.

Institutions offering programs in a single field, e.g., a school of art, engineering, theology, granted accreditation by the Commission shall clearly state that the institutional accreditation does not imply specialized accreditation of any program offered.

\(^2\) See Policy on Representation of Accredited Status
Policy on Institutional Compliance with Title IV
(Adopted June 2011; Edited June 2012, August 2012)

Background
In order to comply with federal regulations regarding Institutional Compliance with Title IV of the Higher Education Act (HEA) [34 C.F.R. § 602.16; 602.27.], the Commission is required to provide the following information it has available germane to an accredited or candidate institution’s program responsibilities or eligibility to participate under Title IV of the HEA.

Notification to the U.S. Secretary of Education of Fraud or Abuse
The Commission shall provide the U.S. Secretary of Education notice of the name of any institution it has reason to believe is engaged in fraud or abuse or is failing to meet its responsibilities under Title IV of the HEA, and the reasons for such concern. Except in cases when the matter warrants a confidential report to the U.S. Secretary, the Commission shall notify the institution if its name is submitted to the U.S. Secretary under this provision.1

Default Rates
Institutions participating in the Title IV programs under the HEA and designating the Commission as their gate-keeping agency must be able to demonstrate diligence in keeping loan default rates at an acceptably low level and must also comply with program responsibilities defined by the U.S. Department of Education. Institutions that have a default rate requiring a default reduction plan should provide a copy of their plan to the Commission. Commission staff shall review the plan to determine its appropriateness, and to determine if any follow-up action is needed. Excessive default rates in the student loan program may be cause for a special report or evaluation.

Compliance with Title IV
During the course of the Commission’s eligibility review, there will be a review of loan default rates and negative actions taken by the U.S. Department of Education regarding compliance of the institution with the requirements of Title IV of the HEA. In addition, the Commission will review information provided by the U.S. Secretary of Education when notified of negative action taken by the U.S. Department of Education regarding responsibilities under Title IV of the HEA. The Commission will determine if the information calls into question compliance with its Accreditation Standards and wherever any follow-up action is needed. Excessive default rates in the student loan program may be cause for a special report or site visit.

1 Regulations require a case-by-case review of the circumstances surrounding an accrediting agency’s contact with the U.S. Secretary of Education. If it is determined there is the need to hold the contact confidential, then the institution will not be notified of the report made. Also, if the U.S. Department of Education requests a report remain confidential, then there will be no notification to the institution. 34 C.F.R. § 602.27(b).
Policy on Institutional Degrees and Credits
(Adopted January 2012; Edited August 2012; Revised October 2013, June 2014)

Background
The Accreditation Standard II, Eligibility Requirements 8 and 9, and the Commission Policy on Award of Credit require institutions to meet generally accepted practices when awarding credit. These practices require evidence of:

1. academic study of sufficient content, breadth, and length;
2. levels of rigor appropriate to the programs and/or degrees, including baccalaureate degrees offered;
3. statements of expected student learning outcomes relevant to the disciplines; and
4. assessment results which provide sufficient evidence that students are achieving key institutional and program learning outcomes.

This policy incorporates federal requirements regarding credit hour and defines credit hour applicable to a degree or certificate awarded by an accredited institution as well as adopts the federal definitions of terms related to institutional degrees and credits.1

Policy
An accredited institution conforms to a commonly accepted minimum program length of 60 semester credit hours or 90 quarter credit hours awarded for achievement of student learning for an associate degree and 120 semester credit hours or 180 quarter credit hours for a bachelor’s degree. Any exception to this minimum must be explained and justified.

An accredited institution must have in place written policies and procedures for determining a credit hour that generally meet commonly accepted academic expectations and it must apply the policies and procedures consistently to its courses and programs.

At the time of an educational quality and institutional effectiveness review (formerly comprehensive review), the Commission will review the institution’s policies and procedures for determining credit hours for its courses and programs and how these policies and procedures are applied. The Commission will as part of this review assess whether the institution implements the clock-to-credit-hour conversion formula. The Commission will make a reasonable determination of whether the institution’s assignment of credit hour conforms to commonly accepted practice in higher education using sampling and other methods. If, following the review, the Commission finds systematic non-compliance with this policy or significant non-compliance regarding one or more programs at the institution, it must take appropriate action and promptly notify the U.S. Secretary of Education.2

1 34 C.F.R. § 602.24(f).
2 34 C.F.R. § 602.24(f)(1),(2); § 668.8(l)(2).
Federal Definitions

Credit hour: An amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutional established equivalence that reasonably approximates not less than:

(1) One hour of classroom or direct faculty instruction and a minimum of two hours of out-of-class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or

(2) At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution, including laboratory work, internships, practica, studio work, or other academic work leading to the award of credit hour.3

There is no requirement that a credit hour exactly duplicate the amount of work in paragraph (1) of the definition, as is highlighted by the provisions in paragraph (2). The requirement is that a credit hour reasonably approximates that minimum amount of work in paragraph (1).4

Clock-to-Credit-Hour Conversion Formula

Federal Formula:

(1) Except as provided in paragraph (2) of this section, below, for purposes of determining the number of credit hours in that educational program with regard to Title IV, Higher Education Act program:

(i) a semester hour must include at least 37.5 clock hours of instruction;

(ii) a trimester hour must include at least 37.5 clock hours of instruction; and

(iii) a quarter hour must include at least 25 clock hours of instruction.

(2) The institution’s conversions to establish a minimum number of clock hours of instruction per credit may be less than those specified in paragraph (1) of this section, if the institution’s designated accrediting agency5, or recognized State agency for the approval of public postsecondary vocational institutions for participation in the Title IV, Higher Education Act programs, has not identified any deficiencies with the institution’s policies or procedures, or their implementation, so long as

(i) The institution’s student work outside of class combined with the clock-hours of instruction meet or exceed the numeric requirements in paragraph (1) of this section

(ii) (A) a semester hour must include at least 30 clock hours of instruction;

(B) a trimester hour must include at least 30 clock hours of instruction; and

(C) a quarter hour must include at least 20 hours of instruction.6

334 C.F.R. § 600.2.
5In the context of this policy, the ACCJC.
634 C.F.R. § 668.8 (l)(1),(2).
Quarter credit hour or quarter hour: quarter credit hours represent proportionately less work than semester hours due to shorter terms; this equates to about two-thirds of a semester credit hour. See USNEI.7

Contact hour or clock hour: a unit of measure which represents an hour of scheduled instruction given to a student. See IPEDS.8

Academic Year: for the purposes of Federal student assistance programs, an academic year has a minimum of 30 weeks of instructional time for a course of study that measures its program length in credit hours or a minimum of 26 weeks of instructional time for a course of study that measures its program length in clock hours. A full time student is expected to complete at least 24 semester credit hours or 36 quarter credit hours in an academic year.9

An academic year in a direct assessment program is a period of instructional time that consists of a minimum of 30 weeks of instructional time during which a full time student is expected to complete the equivalent of at least 24 semester credit hours, 36 quarter hours or 900 clock hours.10

Program: a combination of courses and related activities organized for the attainment of broad educational objectives described by the institution. These may include:

Certificate: a formal award certifying the satisfactory completion of a postsecondary education program, generally focused on a pre-baccalaureate career or technical education program of study that is less than two years of full-time equivalent college work; or

Associate degree: an award that requires completion of an organized program of study at the postsecondary level below the baccalaureate degree which is at least 2 but less than 4 years of full-time equivalent college work. See IPEDS.3

Baccalaureate degree: an award that requires completion of an organized program of study at the postsecondary level which normally requires at least 4 years but not more than 5 years of full-time equivalent college work. See IPEDS.8

Direct Assessment Programs

Programs in which credits and degrees are awarded based solely on successful student demonstration of expected competencies, and not through credit or clock hours, are defined as direct assessment programs.

A direct assessment program is an instructional program that, in lieu of credit hours or clock hours as a measure of student learning, utilizes direct assessment of student learning or recognizes the direct assessment of student learning by others. The assessment must be consistent with the accreditation of the institution or program utilizing assessment results.

7 U.S. Network for Education Information (http://www2.ed.gov/about/offices/list/ous/international/usnei/edlite-index.html)
8 Integrated Postsecondary Education Data System (http://nces.ed.gov/ipeds/)
10 34 C.F.R. § 668.10.

Policy on Institutional Degrees and Credits 78
Direct assessment of student learning means a measure by the institution of what a student knows and what the student can demonstrate in terms of a body of knowledge and identified student learning outcomes at the course, program, and institutional levels which comprise the learning outcomes for the program. These measures provide evidence that a student has command of a specific subject, content area, or skills or that the student demonstrates a specific quality such as creativity, analysis or synthesis associated with the subject matter or program. Examples of direct measures include projects, papers, examinations, presentations, performances, and portfolios.

To be eligible, direct assessment programs must meet federal requirements. The institution must establish a methodology to reasonably equate the direct assessment program to credit or clock hours for the purposes of complying with applicable regulatory requirements. Institutions with direct assessment programs must apply to the Federal Secretary of Education for approval and must include documentation from ACCJC indicating that the Commission has evaluated the institution’s offering of direct assessment program(s) and has included the program(s) in the institution’s grant of accreditation.\(^{11}\)

\(^{11}\) 34 C.F.R. § 668.10; 20 U.S.C. §1088.
Policy on Institutional Integrity and Ethics

(Adopted June 2011; Revised June 2013)

Background
In accordance with the Eligibility Requirements, Accreditation Standards, and Commission policies, the Commission expects each member institution to exhibit integrity and to subscribe to and advocate high ethical standards. Recognition by the U.S. Department of Education requires the Commission to monitor an accredited institution’s compliance with the institution’s Title IV program responsibilities and the institution’s responsibility to ensure that no false, erroneous, or misleading statements or misrepresentation are made about it. 34 C.F.R. 602.16(a)(1)(x).

Policy
Accredited institutions, or individuals acting on their behalf, must exhibit integrity and subscribe to and advocate high ethical standards in the management of its affairs and all of its activities dealing with students, faculty, staff, its governing board, external agencies and organizations, including the Commission, and the general public.

Policy Elements
1. An accredited institution will uphold and protect the integrity of its practices.

2. An institution applying for eligibility, candidacy or extension of candidacy, accreditation or reaffirmation of accreditation, or responding to Commission requests for information or reporting requirements, such as the annual reports, provides the Commission with information that is readily available, current, complete, and accurate, including reports of other accrediting agencies, licensing and auditing agencies. This includes any information on matters that may affect an institution’s integrity.

3. The institution assures the clarity, accuracy and availability of information provided to all persons or organizations and related to its mission statement; its educational programs; its admissions requirements; its student services; its tuition and other fees and costs; its financial aid programs; its policies related to transcripts, transfer of credit and refunds of tuition and fees. The institution reports accurately to the public its accreditation status.

4. The institution has policies to ensure academic honesty, policies to assure integrity in the hiring processes, and policies and procedures to prevent conflict of interest throughout the organization, including governing board decision-making and contracting, and policies that provide due process protections. Such policies are reviewed regularly and are widely available to institutional staff, students, governing board members and the public. The institution is able to provide evidence that it upholds its policies.
5. The institution demonstrates integrity and honesty in interactions with students and prospective students in all academic, student support and administrative functions and services as well as statements and other information provided about its accredited status, its transfer of credit policies, and whether successful completion of its courses qualify students to receive, to apply, and/or to take licensure examinations or non-governmental certification.

6. The institution establishes and publicizes policies ensuring institutional integrity that contain clear statements of responsibility for assuring integrity and describe how violations of integrity are to be resolved.

7. The institution establishes a governance process and policies to receive and address complaints regarding questionable accounting practices, operational activity which is a violation of applicable law, rules, and regulations, or questionable activities which may indicate potential fraud, waste, and/or abuse. The process shall allow for the confidential and anonymous submission of complaints.

8. The institution, in its relationship with the Commission, cooperates in preparation for site visits, receives evaluation teams or Commission representatives in a spirit of collegiality, and complies with the Eligibility Requirements, Accreditation Standards, and Commission policies. The institution maintains an openness and commitment to external evaluation and assists peer evaluators in performing their duties.

9. The institution makes complete, accurate and honest disclosure of information required by the Commission, and complies with Commission requests, directives, decisions and policies. The institution acknowledges that if it fails to do so, the Commission may act to impose a sanction, or to deny or revoke candidacy or accreditation.1,2

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1 Eligibility Requirement 21. See also the Policy on Public Disclosure and Confidentiality, § II: “If an institution conducts its affairs so that it becomes a matter of public concern, misrepresents a Commission action, or uses the public forum to take issue with an action of the Commission relating to that institution, the Commission President may announce to the public, including the press, the action taken and the basis for that action, making public any pertinent information available to the Commission.”

2 Other Commission policies which address integrity and ethics include: Policy on Institutional Advertising, Student Recruitment and Representation of Accredited Status; Policy on Principles of Good Practice in Overseas International Education Programs for Non-U.S. Nationals; Policy on Representation of Accredited Status; Policy on Good Practice in Relations with Member Institutions; and Policy on Institutional Compliance with Title IV.
Background
At some applicant, candidate, or accredited institutions, the institution’s governing board shares decision-making responsibility with one or more non-accredited "related" entities concerning some functions and operations such as those involving finances, planning, governance, budget and approval processes, recruitment, information systems, or employee compensation. This policy is intended to ensure that accreditors receive appropriate assurances and sufficient information and documentation to determine whether such institutions comply with Commission Standards and policies.

A related entity may be a corporate parent, system administration or board, religious sponsor, military sponsor, funding sponsor (which, in some cases, may include an equity or investment fund), or other entity that can affect decisions related to accreditation (herein “Related Entities”). Related entities may include institutional or corporate layers or groups. Ordinarily, local, county, and state legislatures, other accreditors, local advisory boards, and government agencies are not related entities. The scope of this policy does not include “contractual relationships” in which the accredited entity contracts for services; these are governed by a separate Commission policy.

Policy
When an institution shares certain functions with a related entity, the institution is responsible to the Commission for presenting, explaining, and evaluating all significant matters and relationships involving related entities that may affect accreditation requirements and decisions at the time of application, candidacy, review for initial accreditation, comprehensive or interim evaluation, and all other times deemed relevant by the Commission. Although a related entity may affect an institution’s ongoing compliance with Accreditation Standards, the Commission will review and hold only the applicant, candidate, or accredited institution responsible for compliance with Accreditation Standards. The Commission will protect the confidential nature of all information submitted by institutions or by related entities, except as otherwise required by law. Failure of an institution to provide the required certification, guarantee, or other information regarding the institution or related entity requested by the Commission will be addressed as provided in the Commission’s policies.

Procedures
A. General
If an institution is part of a system with shared facilities or processes (e.g., library) or centralized information (e.g., strategic plan), it may use the same documents prepared by the system for other institutions or for other purposes.
If information submitted by an institution, on behalf of itself or a Related Entity, proves to be substantively different from the actual or projected institutional information, the Commission may reconsider its action or take other action. The institution will inform the Commission, through the substantive change process, of any change in the related entity’s financial status, ownership, governance, or other development that might significantly affect the institution.

The institution will provide certification from the related entity(ies) in the certification form attached, and other information requested by the Commission at the time of application, candidacy, review for initial accreditation, comprehensive or interim evaluation, and all other times deemed relevant by the Commission. The Commission may ask for a guarantee or different form of certification. The Commission may modify provisions of this policy under appropriate circumstances.

B. Applicant and Candidate Institutions and Applicants for Change of Ownership

The applicant or candidate will provide the following information in addition to information required by the Commission’s Related Entities, Substantive Change, or other policies, unless waived by the Commission:

1. Financial Statements: Audited financial statements with management letters for the applicant/candidate and related entities designated by the Commission.

2. Planning and Budgeting: The financial plan for the current and succeeding years covered by the applicant/candidate’s strategic plan, including enrollment projections for the period covered by its financial plan, and an analytical narrative that reconciles the financial plan to the operating plan.

3. Risk Analysis: An analysis of financial information that assesses the institution’s capacity and risk factors and includes, where appropriate, the flow of funding to or from the accredited affiliated institution from the related entity; bond ratings and analyses; debt; consideration of metrics such as revenue, market capitalization, earnings per share, earnings before interest, taxes, depreciation and amortization, measurement of liquidity, price/earnings ratio, debt/equity ratio, and U.S. Securities and Exchange Commission (SEC) and 10K filings for publicly traded proprietary institutions.

4. The applicant/candidate will obtain from the related entity and include in its reports relevant information from all sources, such as legislative staff funding analyses, review by or of the related entity, SEC 10K, and other filings. Relevant information is only information that relates to the accredited institution’s compliance with Commission requirements, Standards, and policies.

C. Additional Substantive Change Provisions for Change of Ownership

Change of ownership will continue to be handled in accordance with the substantive change policy of the Commission. In addition to the requirements in the preceding section and of the Commission’s Substantive Change Policy, procedures for evaluating a change of ownership application will include submission of the following:

1. Acquisition Plan: The agreement, relevant filings with the U.S. Securities and Exchange Commission (if applicable), and a detailed plan for the acquisition by the new owner that
demonstrates how the institution, under the new owner, will meet or continue to meet all Eligibility Requirements and Accreditation Standards. The principals of the acquiring entity must demonstrate the experience and expertise necessary to operate the institution, and if they operate other institutions, that they are in full compliance with all applicable laws, rules, and regulations.

2. **New Initiatives:** Description of any new educational, growth, or other initiatives by the related entity or others anticipated to be planned within 12 months of the substantive change application that could materially affect the plans and/or operations of the institution (such as restructuring management or increasing enrollment). If such anticipated changes would constitute substantive changes (such as change of mission or addition of new locations), the change of ownership application should address these changes.

3. **Finances:** Description of how the financial viability of the related entity and the institution are affected by the change of ownership, giving both entities the continuing capacity to meet changing financial needs of the institution.
Certification Form for Related Entities

Certification: “The related entity has reviewed the materials submitted by the institution regarding the relationship between the related entity and institution, and certifies that the materials are complete and correct to the best of its knowledge.”

_________ represents that it controls ___________ either directly or through (Related entity) (the institution) one or more intermediate entities. It certifies that it recognizes the Commission’s compliance requirements for ___________ and will ensure that ___________ responsibilities (the institution) (the institution’s) that relate to areas controlled or influenced by ___________ are fulfilled. (related entity)

________________________________________________
(Name)

_______________________________________  ________
(Signature of the CEO of the Related Entity)     (Date)

_________________________________________________
(Name)

________________________________________  ________
(Signature of the CEO of the Institution)            (Date)
Preamble
The purpose of these policies is to establish and define the respective roles of the regional higher education accrediting commissions in assuring quality and encouraging the improvement of affiliated institutions operating interregionally. Developed by the Council of Regional Accrediting Commissions (CRAC), they are designed to address concerns arising from differences that may exist among regional commission criteria and their application in off-campus operations. The interregional policies encompass only those colleges and universities which have physical presence, appropriate state authorization, and offer instruction equivalent to 50% or more of a degree program in another (host) region(s) than their home region where they hold accreditation. Once adopted, however modified, these policies will encompass all regionally accredited institutions and will establish a common framework for the evaluation of institutions operating interregionally.

These policies are based upon the following fundamental premises:

- The home region should be demonstrably accountable for its accreditation decisions affecting institutions operating in host regions.
- The host region has a legitimate interest in the quality of institutions from other regions operating within its jurisdiction.
- The home and host regions, while honoring these policies and the procedures designed to implement them, have flexibility in defining the host region’s role in the evaluation of instructional sites operating in its region.
- The eight regional commissions, building on their commonality of tradition and long-standing mutual respect, will work cooperatively, together with affected institutions, to implement these policies toward the fulfillment of their quality assurance responsibilities in the review of transregional programming while honoring institutional autonomy and integrity.

These policies represent a departure from past practice. Their continued efficacy rests upon the commitment of the involved commissions to assess their effectiveness and otherwise determine their impact on their member institutions, making modifications as are necessary. For that reason, CRAC has recommended that these policies be implemented on a three-year (2000-2003) pilot basis. While it is expected that once in force the policies will materially affect the evaluation of institutions operating across regional boundaries, it is also understood that first experiences will likely result in the need for corrections and adjustments in their content. For that reason, CRAC is committed to undertake in 2003 a basic review of the effectiveness of the policies in achieving their purposes.
Policy Statement on the Evaluation of Institutions Operating Interregionally

To preserve the values and practices of peer review and regional accreditation, the evaluation of institutions that deliver education at a physical site(s) in another region(s) will be undertaken with the participation of the host regional accrediting commission(s). This will include the joint (home/host) review of off-campus sites in a host region against the Accreditation Standards of that region.

Procedures for the evaluation of colleges and universities operating interregionally will honor these basic principles:

- The mission of the institution will be respected throughout the evaluation process.
- The design and implementation of the strategy fashioned to evaluate its host region instructional sites will be developed collaboratively by the participating regional commissions together with the affected institution.
- The home region's evaluation processes will serve as the basis for the joint evaluations and the home region will take the leadership role in initiating and overseeing the process.
- The home region will be solely responsible for final accrediting actions, but will respond to issues brought to its attention by the host commission as identified through its involvement in the institutional review.
- Host commission participation in an interregional accrediting process shall not constitute accreditation of the institution by that commission.
- The host region retains the discretion to determine its involvement in the evaluation of institutions operating interregionally.

Exchanging Information

To assure that each commission is adequately apprised of the instructional activities of out-of-region institutions in its region, the following information will be exchanged as specified:

A. Annually, each commission will notify the other affected commissions of any of its institutions operating interregionally. The information provided will include: location(s), levels of degree offerings, and number of students enrolled. It is understood here as elsewhere, that notice need only be provided regarding those locations where 50% or more of a degree program are offered.

B. Each commission will notify other relevant commissions when one of its institutions intends to establish a new out-of-region instructional site. In such cases, the home commission in consultation with the host region together with the institution, will determine if the new site(s) constitute a substantive change and thus be subject to review under the interregional accrediting processes.

Procedures for the Interregional Accrediting Process

Notice to Host Region of Planned Evaluations

The home region will provide timely notice to the host region(s) of:

A. scheduled comprehensive evaluations of institutions with instructional sites in the host region;
B. any focused visits which include the review of sites in the host region or includes issues related to off-campus programming;
C. any other evaluations of new sites in the host region.

Procedures for Evaluations

A. Standards to be Applied
The Standards of both the home and host region will be applied at host region sites using a “home standards plus” model. That is, the Standards of the home region will be used as the basis for the evaluation as supplemented by any criteria of the host region identified in the design process for the evaluation.

B. Evaluation Protocol
Well in advance of the comprehensive visit, the home and host commissions, in consultation with the institution, will develop a protocol for the evaluation of host region sites to include: 1) the scope of the review; 2) which sites are to be reviewed, with the final decision remaining with the home region; 3) the content of the self evaluation report(s) for the sites to be visited with particular attention to how identified host region Standards are to be addressed; and 4) any other matters of agreement relevant to the evaluation, including issues of possible public disclosure.

C. Site Team Composition
The size and composition of the team visiting host region sites will be jointly determined, with the host region being afforded the opportunity to appoint up to 50% of the team’s membership. The host region may appoint a vice or co-chair as agreed upon by the home region. Teams will otherwise be appointed in keeping with home region procedures. It is understood that the host region’s conflict of interest policy will apply for the team members it appoints.

D. Costs
The costs for the evaluation of host region sites will be billed in keeping with the home region’s policies. The home region will otherwise administer reimbursement of evaluator expense also in keeping with its policies.

Procedures for Evaluation Reports

A. A single evaluation report will be prepared for each of the sites visited within the host region, as agreed upon by the commissions involved.

B. The evaluation report will include a review of the site under the home region’s Standards, and as appropriate, findings regarding the host region’s Standards as previously identified and any topics included in the evaluation under prior agreement. Recommendations to the home region can be made by both home and host sub-groups on the team.

C. Site team reports are provided to the host region by the home region upon receipt. In cases of comprehensive evaluations, the home region’s institutional evaluation report is also forwarded to the host region.

D. The host region is responsible for establishing processes for the timely review of site-specific evaluation reports prior to their being considered by the home regional
commission so as to provide any comments it believes should be taken into consideration as the institution's case is reviewed.

F. The policy of confidentiality for team recommendations of the home region will apply.

Procedures for Decisions and Notification

A. The home region's decision-making processes will ensure that the institution has the opportunity to respond to the team report and any comments from the host region before a final decision is made.

B. The home region takes the final accrediting action and is responsible for providing notification of that action to all relevant parties, including the host region.

C. When the final action differs from the recommendation and comments of the host region, if any, a rationale for the action will be sent upon request by the home to the host region.

D. The home region is responsible for addressing any misrepresentation of the interregional evaluation on the institution's accreditation status.

Policy Statement on Separately Accreditable Institutions

In an effort to be consistent and equitable to all institutions, the following criteria for identifying separately accreditable institutions will be applied by each of the regional accrediting commissions.

An instructional site located in a region other than that of its home campus must seek separate accreditation in the region it exists if it functions independent of operational control of the parent college or university. An instructional site will be deemed operationally independent and accreditable by the host region when it meets these criteria:

The instructional site:

1. has, under board policy, substantial financial and administrative independence from the home institution including matters related to personnel;
2. has a full time chief administrative officer;
3. is empowered, under board policy, to initiate and sustain its own academic programs;
4. has degree-granting authority in the state or jurisdiction in which it is located.

Each regional commission, upon the adoption of this policy, will determine if any of its affiliated institutions have instructional sites that appear to be separately accreditable. Following consultation with the host commission and the institution, and upon learning from the host region the site's potential to meet its Eligibility Requirements, the home region will make the determination as to the status of such sites that meet these criteria. The host region agrees to take deliberate steps toward reviewing any instructional sites identified as operationally independent in keeping with its policies and procedures for applying institutions. An institution identified as separately accreditable will continue to be included in the accreditation of the parent college or university until it achieves separate accreditation.
Off-campus instructional sites, regardless of location, not found to be operationally independent are included in the accreditation of the home campus. The operational independence of such sites is periodically reviewed under this policy.

Nothing in this policy is intended to require the home region to accredit a separately accreditable instructional site in another region.
Policy Regarding Matters Under Litigation

The Commission’s concerns are to determine whether an institution is in compliance with Commission Standards and policies and to assist institutions, through established procedures, in the improvement of quality.

To this end, the Commission takes appropriate action on credible evidence received from any reliable source, including the courts, that calls into question the ability of an institution to meet Commission Standards and policies. It is the policy of the Accrediting Commission not to become involved in litigation within an institution. The Commission is not an adjudicatory agency, and it is not the role or function of the Commission to arrive at any determination regarding the merits of any aspect of pending litigation.

Because of the sensitivities created when litigation is pending during a site visit by an evaluation team, the Commission has developed the following guidelines.

Responsibility of the Institution
It is the responsibility of the institution to inform the Commission staff, prior to a visit, of any pending litigation against the institution. The staff will consult with the liaison officer to determine if any special advice will need to be provided to the Team Chair.

Responsibility of Visiting Teams
Visiting teams should not comment on pending litigation in such a way as to express an opinion about the merits of the lawsuit or its outcome. Team members are not precluded from meeting with individuals involved in litigation and hearing from them regarding the litigation. If such a meeting is held or if the subject of the litigation arises during the course of interviews, the institution will be informed. Team members are cautioned against saying or writing anything which may be used by either party in support of their positions in the lawsuit.

If questions arise prior to, during, or after a visit, Commission staff should be consulted.
The Commission’s responsibility is to determine whether an institution is in compliance with Eligibility Requirements, Accreditation Standards and Commission policies and to assist institutions, through established procedures, in the improvement of quality.

Commission Monitoring of Institutional Performance

In support of its purposes, the Commission applies a set of annual monitoring and evaluation approaches that assess an institution’s continued compliance with Eligibility Requirements, Accreditation Standards and Commission policies, and that take into account institutional strengths and stability. Such annual monitoring will include, but not be limited to:

- Headcount enrollment data
- Data concerning growth in the number of instructional sites
- Collection and analysis of key data and indicators of student achievement and student learning
- Collection and analysis of key data and indicators of fiscal stewardship and stability
- Such other elements as determined by the Commission

Information from the annual monitoring reports will be provided to external evaluation teams for inclusion in the evaluation report. In addition, the Commission may request a special report, with or without a visit on the basis of data provided in annual monitoring reports.

Responsibility of the Institution

It is the responsibility of the institution to inform the Commission of any circumstance that significantly impacts the institution’s operational, academic and student services, or fiscal strength and stability or its compliance with Eligibility Requirements, Accreditation Standards and Commission policies.

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1 34 C.F.R. §602.19.
2 Headcount enrollment increases will be considered significant if they represent a one-year increase of 50% or more, 40% or more in two consecutive years, or 30% or more in three consecutive years. If headcount enrollments are significant, then the Commission will begin to monitor the enrollments of particular programs impacting the overall institutional increase.
3 Increases in the number of sites at which 50% or more of a program is offered will be considered rapid growth if they represent a one-year increase of 50% or more, 40% or more in two consecutive years, or 30% or more in three consecutive years. If there is rapid growth in instructional sites, then the Commission may request a special report, with or without visit.
Policy on Principles of Good Practice in Overseas International Education Programs for Non-U.S. Nationals
(Adopted February 1990; Edited October 2006, January 2007, August 2012)

Preface
The Presidents/Executive Directors of the regional institutional accrediting bodies of the Council of Regional Accrediting Commissions subscribe to the following principles of good practice in overseas international education programs for non-U.S. nationals. Each regional institutional accrediting body will apply these principles consistent with its own accrediting standards.

Principles of Good Practice

Institutional Mission
1. The international program is rooted in the U.S. institution's stated mission and purposes and reflects any special social, religious, and ethical elements of that mission.

2. The faculty, administration, and governing board of the U.S. institution understand the relationship of the international program to the institution's stated mission and purposes.

Authorization
3. The international program has received all appropriate internal approvals where required, including system administration, government bodies, and accrediting associations.

4. The international program has received all appropriate external approvals where required, including system administration, government bodies, and accrediting associations.

5. The U.S. institution documents the accepted legal basis for its operations in the host country.

Instructional Program
6. The U.S. institution specifies the educational needs to be met by its international program.

7. The content of the international educational program is subject to review by the U.S. institution's faculty.
8. The international education program reflects the educational emphasis of the U.S. institution, including a commitment to general education when appropriate.

9. The educational program is taught by faculty with appropriate academic preparation and language proficiencies whose credentials have been reviewed by the U.S. institution.

10. The standard of student achievement in the international program is equivalent to the standard of student achievement on the U.S. campus.

11. The international educational program where possible and appropriate is adapted to the culture of the host country.

Resources
12. The institution currently uses and assures the continuing use of adequate physical facilities for its international educational program, including classrooms, offices, libraries, and laboratories, and provides access to computer facilities where appropriate.

13. The U.S. institution has demonstrated its financial capacity to underwrite the international program without diminishing its financial support of the U.S. campus. Financing of the international program is incorporated into the regular budgeting and auditing process.

Admissions and Records
14. International students admitted abroad meet admissions requirements similar to those used for international students admitted to the U.S. campus, including appropriate language proficiencies.

15. The U.S. institution exercises control over recruitment and admission of students in the international program.

16. All international students admitted to the U.S. program are recognized as students of the U.S. institution.

17. All college-level academic credits earned in the international program are applicable to degree programs at the U.S. institution.

18. The U.S. institution maintains official records of academic credit earned in its international program.

19. The official transcript of record issued by the U.S. institution follows the institution’s practices in identifying by site or through course numbering the credits earned in its off-campus programs.
Students
20. The U.S. institution assures that its institutional program provides a supportive environment for student development, consistent with the culture and mores of the international setting.

21. Students in the international program are fully informed as to services that will or will not be provided.

Control and Administration
22. The international program is controlled by the U.S. institution.

23. The teaching and administrative staff abroad responsible for the educational quality of the international program are accountable to a resident administrator of the U.S. institution.

24. The U.S. institution formally and regularly reviews all faculty and staff associated with its international program.

25. The U.S. institution assesses its international program on a regular basis in light of institutional goals and incorporates these outcomes into its regular planning process.

Ethics and Public Disclosure
26. The U.S. institution can provide to its accrediting agencies upon request a full accounting of the financing of its international program, including an accounting of funds designated for third parties within any contractual relationship.

27. The U.S. institution assures that all media presentations about the international program are factual, fair, and accurate.

28. The U.S. institution's primary catalog describes its international program.

29. The U.S. institution does not sell or franchise the rights to its name or its accreditation.

30. The U.S. institution assures that all references to transfer of academic credit reflects the reality of U.S. practice.

31. The U.S. institution assures that if U.S. accreditation is mentioned in materials related to the international program, the role and purpose of U.S. accreditation is fairly and accurately explained within these materials.

Contractual Arrangements
32. The official contract is in English and the primary language of the contracting institution.

33. The contract specifically provides that the U.S. institution controls the international program in conformity with these guidelines and the requirements of the U.S. institution's accreditations.
34. The U.S. institution confirms that the foreign party to the contract is legally qualified to enter into the contract.

35. The contract clearly states the legal jurisdiction under which its provisions will be interpreted will be that of the U.S. institution.

36. Conditions for program termination specified in the contract include appropriate protection for enrolled students.

37. All contractual arrangements must be consistent with the regional commissions’ document, “Contractual Relationships with Non-Regionally Accredited Organizations.”
Adopted February 12, 1990 by the Executive Directors of the Regional Institutional Accrediting Bodies:

Middle States Commission on Higher Education

Commission on Institutions of Higher Education of the New England Association of Schools and Colleges

Higher Learning Commission of North Central Association of Colleges and Schools
Northwest Commission on Colleges and Universities

Commission on Colleges of the Southern Association of Colleges and Schools

Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges

Accrediting Commission for Senior Colleges and Universities, Western Association of Schools and Colleges
Policy on Public Disclosure and Confidentiality in the Accreditation Process

(Adopted June 1999; Edited June 2002; Revised January 2003; Edited June 2005; Revised January 2006; Edited October 2007; Revised January 2010, June 2012; Edited August 2012; Revised June 2013, October 2013)

Background
The ACCJC and its member institutions shall provide information about the results of institutional accreditation reviews to students, the public, employers, government agencies and other accrediting bodies. Students and others rely on accreditation status as an indicator of educational quality, and there is growing public interest in accreditation processes and the outcomes of accreditation reviews for individual institutions.

The purpose of this policy is to strengthen the ability of institutions and the Commission to fulfill their respective obligations to provide transparency in accreditation in a manner that will enhance public confidence in the educational quality of accredited institutions and protect the integrity of the accreditation process. The policy goals are:

1. to make meaningful information about institutional quality available to students and prospective students, the public, employers and government agencies;
2. to provide institutions with guidelines for communicating information about their accredited status and their response to the ACCJC’s actions and recommendations; and
3. to protect the integrity and validity of the accreditation review process by maintaining appropriate levels of confidentiality about aspects of the accreditation process.

Policy
Both the Commission and the institution have responsibilities to provide information about institutional quality and the accreditation process to the public. Public confidence in higher education is enhanced by disclosure of information about the outcomes of accreditation reviews. Institutional reports prepared for the accreditation process, External Evaluation Reports of Educational Quality and Institutional Effectiveness, and the Commission’s action letter stating the outcome of an accreditation review and the institution’s resulting accreditation status, shall be made available to campus constituencies, students, and the public after the Commission takes action on the institution’s accreditation.

However, confidentiality is also critically important during the accreditation process. The accreditation process must occur within a context of trust and confidentiality if it is to result in an accurate appraisal of institutional quality. The efficacy of the accreditation process requires that institutions provide accurate information, candid institutional self evaluation, and evidence of compliance with Accreditation Standards and Eligibility Requirements. It also requires that the external evaluation teams and the Commission provide carefully prepared, accurate, rigorous, and candid analysis of institutional quality and recommendations for improvement of quality.
The Commission’s Responsibilities for Public Disclosure

I. Public Disclosure of Information about Accreditation Policies and Processes

Institutions applying for candidacy or initial accreditation and accredited institutions undergoing periodic evaluation are reviewed by the ACCJC under defined and published policies and procedures that conform to the recognition requirements of the U.S. Department of Education.

In accordance with the requirements of the Higher Education Act (34 C.F.R. § 602.27(c).), the ACCJC discloses in its Accreditation Reference Handbook, the Eligibility, Candidacy and Initial Accreditation Manual, and other appropriate publications on institutional evaluation, each type of candidacy granted by the Commission, the procedures for applying for eligibility, candidacy, or initial accreditation, and the criteria and procedures used by the Commission in determining whether to grant, reaffirm, deny, terminate accreditation or take any other action related to the accredited status of institutions. All commission policy documents and procedural manuals as well as related publications are available on the ACCJC website.

The ACCJC maintains a website which informs members and the public about the Commission and its practices (www.accjc.org). The ACCJC discloses through its website the names, academic and professional qualifications, and relevant employment and organizational affiliations of the Commissioners and the ACCJC’s principal staff.

The Commission publishes a newsletter at least twice annually to provide timely information about accreditation. The newsletter includes a review of major accreditation issues in the region, a list of Commission actions, the list of institutions scheduled for educational quality and institutional effectiveness review, and updates of Commission policies. The newsletter is distributed to all member institutions, other accreditors, and appropriate higher education and government associations and agencies. The newsletter is available to the public on the ACCJC website. A list of upcoming comprehensive evaluation visits is also available to the public upon request.

The Commission publishes handbooks, manuals, and other materials which describe the Commission and its processes; these are available to all member institutions and to the public on the ACCJC website.

The Commission and Commission staff make presentations before organizations within higher education, government, and the public at large. The Commission and its staff participate in regional and national forums on subjects related to quality assurance and institutional improvement.

The Commission regularly renews its commitment to the principles expressed in its policies through a process of review by the Commission Policy Committee. When new issues in the field of higher education emerge, policies may be created, revised or eliminated. After being approved for first reading by the Commission, institutional policies are sent to the field for review and comment, followed by submission to the Commission for second reading and adoption. When changes from the U.S.
Department of Education require policy revisions or additions, these revisions are made expeditiously, with timely notification to the field. The Commission announces all new policies and policy revisions after adoption.

II. Public Disclosure of Information about Institutions Accredited by the ACCJC

The ACCJC maintains on its website a Directory of Member Institutions currently accredited, in candidacy status, or formerly accredited by the ACCJC. The Directory includes the name of the institution, its legal address and the addresses of major additional campus sites, the name of the Chief Executive Officer (CEO), the form of control, each type of accreditation or pre-accreditation (candidacy) status held by the institution, the date of initial accreditation by the ACCJC, and the date when the Commission will next review or consider the accreditation or candidacy of each institution. Public disclosure of accreditation information about an institution by the Commission is limited to matters addressed in the Eligibility Requirements, Accreditation Standards, and Commission policies.

The Commission also posts a Public Disclosure Notice to the Directory of Member Institutions for every institution that is on Probation or Show Cause status, and a link to the institution’s response, if any, to a Public Disclosure Notice. The Public Disclosure Notice describes the reasons the institution has been judged to be deficient (see discussion of Public Disclosure Notice below).

The Directory of Member Institutions also lists the names of institutions that were formerly accredited by the ACCJC and withdrew from accreditation or were subject to termination or denial of accreditation or candidacy, and the date on which the Commission took adverse action on such institutions. Under the provisions of the U.S. Department of Education Secretary’s Procedures and Criteria for the Recognition of Accrediting Agencies (34 C.F.R. § 602.2.), only denial or termination of accreditation or candidacy are defined as adverse actions by the Commission.

A Statement of Accredited Status is made available to each member institution and any member of the public upon request. The Statement includes information about the nature of the institution and the degrees and certificates it awards to students, its accredited status, the most recent Commission action on the accredited status of the institution, a definition of the meaning of the accredited status, a description of any follow-up reports or visits that may be required, and the institution’s next comprehensive evaluation date.

If an institution conducts its affairs so that it becomes a matter of public concern, misrepresents a Commission action, or uses the public forum to take issue with an action of the Commission relating to that institution, the Commission President may announce to the public, including the press, the action taken and the basis for that action, making public any pertinent information available to the Commission.

III. Public Disclosure of Information about Commission Actions on the Accredited Status of Institutions (34 C.F.R. § 602.26(a),(b),(c),(d).)

The Commission discloses information to the public about all actions it takes on the accredited status of institutions. Actions of the Commission regarding the accredited
status of institutions are defined in the Policy on Commission Actions on Institutions. The Commission notifies the U.S. Secretary of Education, appropriate state licensing or authorizing agencies and accrediting bodies of all actions on the accredited status of institutions within 30 days of the Commission’s meeting as required by the Higher Education Act. It also makes the information available to other interested parties and to the public within 30 days of the Commission’s meeting, by publishing the status of each institution on its entry in the Directory of Accredited Institutions and publishing a list of all institutional actions taken at each meeting of the Commission on the ACCJC website. Commission actions on institutions are also announced in the Commission newsletter.

In cases where the Commission has taken final action to terminate, deny or accept the withdrawal of accreditation or to terminate, deny or accept the withdrawal of candidacy or to place an institution on Probation or Show Cause, the Commission provides the written notification to the U.S. Secretary of Education, appropriate state licensing or authorizing agencies and accrediting bodies at the same time as notification is provided to the college, and provides the notification to the public within 24 hours of the notification of Commission action to the institution.

In cases where the Commission has taken final action to terminate, deny or accept the withdrawal of accreditation or to terminate, deny or accept the withdrawal of candidacy or to place an institution on Probation or Show Cause, the institution’s entry in the Directory of Accredited Institutions will be supplemented by a Public Disclosure Notice with a brief statement summarizing the reasons for the action taken. Institutions are permitted to provide a response to a Public Disclosure Notice. No later than 60 days after the Commission’s action, the Commission will post the Public Disclosure Notice and an electronic link to an institution’s official response on the Commission’s Directory of Accredited Institutions. Within 60 days after the Commission’s action, the Commission also provides written notification of the Public Disclosure Notice and the institution’s response to the U.S. Secretary of Education, appropriate state licensing or authorizing agencies and accrediting bodies.

The Commission also provides written notification to the U.S. Secretary of Education, appropriate state licensing or authorizing agencies and accrediting bodies, and upon request, the public, if an accredited or preaccredited institution decides to withdraw voluntarily from accreditation or preaccreditation or if the institution lets its accreditation or preaccreditation lapse. The Commission will provide the notification within 30 days of receiving notice from the institution of the date that it is withdrawing voluntarily or of the date on which accreditation or preaccreditation lapses.

IV. Public Disclosure of Information about How to File Complaints
Federal regulations require accreditors recognized by the U.S. Department of Education to receive complaints against accredited institutions and to investigate complaints that an institution has violated Accreditation Standards. The ACCJC posts information about its policy and procedures for filing complaints against institutions accredited by the Commission in a prominent position on its website. The ACCJC also requires accredited or candidate institutions to post information about how to file a complaint with the ACCJC in the institution’s information for students (34 C.F.R. § 668.43.).
Member Institutions’ Responsibilities for Public Disclosure

I. Disclosure of Candidacy or Accredited Status

The institution is required to describe its accredited status using the language prescribed in the Commission’s “Policy on Representation of Accredited Status” and to avoid expanding that representation to include other matters such as transfer of credit. The address and telephone number of the Commission office shall be included wherever the institution references its accredited status, such as the website, institutional catalog and recruiting materials. Each institution must send a copy of the institutional catalog to the Commission office as each revised edition is published.

When the institution refers to its accredited status in any publications or advertisements during a period in which its accreditation status includes a sanction of Warning, Probation or Show Cause from the ACCJC, the institution must disclose that information.

II. Disclosure of the Results of an Accreditation Review

The CEO of the institution is responsible for informing the campus community of the accreditation action taken by the Commission and the reasons for the action. If the institution is in a multi-college system, the CEO is responsible for providing copies of college and External Evaluation Reports, and the Commission action letter, to the system CEO and members of the governing board. If the accreditation action includes a sanction of Warning, Probation or Show Cause, or if the institution’s accreditation has been terminated, the institution is obligated to provide that information to all current and prospective students and staff and governing board members within five days of the CEO’s receipt of the Commission’s action letter informing the institution of its accreditation status.

The Commission requires each accredited institution to make public the Self Evaluation Report of Educational Quality and Institutional Effectiveness, the External Evaluation Report, and the Commission action letter by placing the documents on the institution’s website as well as other locations accessible to students and the public.

III. Information about the Institution’s Accreditors, Including the ACCJC and any other Specialized or Programmatic Accrediting Bodies, and State, Tribal or other Authorizing Bodies

The institution must post to its website and include in its catalog clear and accurate information about the agencies that have accredited it. Under federal regulations, an institution must make readily available to enrolled and prospective students the names of associations, agencies or governmental bodies that accredit, approve or license the institution and its programs and the procedures by which documents describing an institution’s accreditation, tribal approval or licensing will be made available to students and prospective students. 34 C.F.R. § 668.43.

IV. Information about Contact Information for Filing Complaints with the ACCJC and with the Institution’s State Approval or Licensing Agency

The institution must make readily available to enrolled and prospective students the contact information for filing complaints against the institution with the agencies that
accredit and that provide state licensing or approval, or tribal approval, to the institution. Enrolled and prospective students are to be referred to the Complaint Process and Complaint Policy on the ACCJC’s website at www.accjc.org.
34 C.F.R. § 668.43.

V. Information about Evaluation Visits to the Institution

The Commission requires that the CEO notify the campus community of the date and purpose of each educational quality and institutional effectiveness review and any Follow-Up Reports or team visits requested by the Commission. Key elements in that notification to the campus community shall include the following:

- Notice of the opportunity for submission of third-party comments by the public and the process for doing so;
- Information regarding where and how the Accreditation Standards may be accessed;
- Information regarding the implementation of the institutional self-evaluation process, the development of the Institutional Self Evaluation Report, and a call for widespread participation; and
- Information regarding the evaluation visit, evaluation team composition, dates of the visit, and team schedule and activities. Institutions are expected to publicize times and locations during the visit when, during educational quality and institutional effectiveness reviews, evaluation team members have scheduled open meetings to discuss with any member of the campus community any issue related to the institution’s accreditation.

VI. Information about Institutional Effectiveness in achieving mission

The accreditation process requires institutions to gather and analyze information about achievement of mission. Institutions shall regularly disclose to students, prospective students and the public accurate and useful information about the institution’s educational effectiveness, including student achievement and student learning.

The Commission’s Responsibility for Confidentiality

I. The Commission does not ordinarily make Institutional Self Evaluation Reports, the External Evaluation Reports or the Commission action letters public. Should the institution fail to make the Institutional Self Evaluation Report, the External Evaluation Report, or Commission action letter available to the public as per the institution’s responsibilities for public disclosure contained in this policy, or if it misrepresents the contents of the reports, the Commission will release the reports to the public and provide accurate statements about the institution’s quality and accreditation status.

II. The Commission does not generally disclose information about an institution’s potential accredited status before a Commission action is taken. Information about actions under review or appeal (denial of candidacy or initial accreditation, or termination of accreditation) will not be disclosed until a final decision is rendered, unless required by federal regulation. Review and appeal procedures are found in the “Policy on Review of Commission Actions,” the Bylaws of the Accrediting Commission for Community and
Junior Colleges, Western Association of Schools and Colleges, and the “Appeals and Hearing Procedures.”

III. The institutional file in the Commission office is part of the private relationship with the institution and is therefore not available to the public. Correspondence and verbal communication with the institution or its members can remain confidential at the discretion of the Commission President. The Commission will consider institutional requests for confidentiality in communications with the Commission in the context of this policy.

IV. The Commission does not generally release contact information of its evaluators to the public.

V. Upon request, the Commission will disclose the number of complaints received about the institution since the last educational quality and institutional effectiveness review, the general nature of those complaints, and their resolution or status. In accordance with its “Policy on Student and Public Complaints Against Institutions”, the Commission will only include in that disclosure formal, signed complaints that are within the Commission’s jurisdiction and which have been referred to the institution. Multiple complaints about a single issue will be assessed to determine how those complaints should be recorded. The Commission informs the institution when such an inquiry is received.

VI. In order to assure the accuracy and appropriateness of institutional information which is made public, the Commission expects evaluation team members to keep confidential all institutional information read or heard before, during, and after the evaluation visit. Except in the context of Commission work, evaluation team members are expected to refrain from discussing information obtained in the course of service as an evaluation team member. Sources of information that should remain confidential include the current Institutional Self Evaluation Report; previous External Evaluation Reports; interviews and written communication with campus personnel, students, governing board members, and community members; evidentiary documents, and evaluation team discussions.

**Member Institution’s Responsibilities for Confidentiality**

I. The institutional CEO is sent a draft of each External Evaluation Report for purposes of correcting errors of fact. The CEO is expected to keep the draft Report confidential.

II. The institution is expected to refrain from releasing personal contact information about evaluation team members to the public.

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1 Also refer to the Statement on the Process for Preserving Confidentiality of Documents Related to Institutional Evaluations.
Policy on Refund of Student Charges

(Adopted June 2005)

Background
National attention has for some time focused on the matter of fair and equitable refund of student charges and fees. Since 1976, federal law has required that all institutions receiving federal student-aid funds have equitable refund policies. This policy summarizes elements of fair and equitable refund of tuition, room, board and other charges for students who withdraw from their studies or otherwise discontinue their use of an institution’s services before the end of an academic term. It offers a balanced approach to issues related to refunds, including the financial commitments incurred by the institution and the responsibility to treat both withdrawing and continuing students fairly. Overall, it requires institutions to ensure that their students’ rights to fair and equitable treatment are fully recognized.

Policy
Institutions shall publish a current schedule of all student charges including a statement of the purpose for such charges and a list of optional or non-refundable charges and deposits. Institutions shall also develop, make public, and adhere to policies and procedures for the fair and equitable refund of all charges made to students except those that are clearly identified as “non-refundable.”

Policy Elements
The institution’s refund policy should be consistent with the National Association of College and University Business Officers (NACUBO) guidelines, accepted by the United States Department of Education to meet the 1976 federal law requirements, and include:

- Adoption by the governing board and wide dissemination.
- A clear distinction between those charges and deposits that are refundable and those that are not.
- A reasonable sliding scale of refund amounts or percentages of fees, deposits, and charges that is tied to specific dates within the academic term. A notification that withdrawal and requests for refunds must be made in writing and addressed to designated college officials.
- An appeal process for students who feel that individual circumstances warrant exceptions from published policy which includes the name, title, and address of the official responsible.
- A timely schedule of repayment or credit of refunds which considers the time required to process a formal student request for refund, to process a check if required, and to allow for mail delivery when necessary.
The following statements govern representations which can be made by an institution about its accredited status during eligibility review, and representations which must be made by institutions with candidate (preaccreditation) or accredited status. In addition, institutions on probation, show cause, or termination status must disclose that information to students and prospective students and in any publication where the institution makes reference to its accredited status.

An institution must post information for the public concerning its accredited status online, no more than one page (one click) from the institution's homepage. That information will include the representation of accredited status noted below, reports and documents concerning accreditation activities and related data required to be available to the public, and information concerning programmatic accreditation.¹

A. Representation of Status by Institutions Preparing, Submitting, or Completing Eligibility Reviews

An institution which is preparing, has submitted, or completed an eligibility review has no formal relationship with the Commission. An institution that has completed an eligibility review may not make any representation which claims or implies any relationship with the Accrediting Commission.

During the period in which the college prepares its institutional self evaluation, the institution does not have a publicly recognized relationship with the Accrediting Commission and cannot represent itself to current or prospective students, the public, governmental agencies, other accrediting bodies, or any other parties as having an affiliated status with the Commission.

No formal or informal statements should be made about possible future accreditation, status, or qualification which is not yet conferred by the Commission.

Representations should include and be limited to the following statement:

At its (date of meeting), the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges reviewed and accepted the Eligibility Report submitted by (name of

¹ Institutions which have candidate (pre-accreditation) or accredited status with the ACCJC are required to disclose their accredited status. Institutions which disclose their accredited status are required to do so in a manner that provides certain information to the public in an accessible manner. The requirements arise out of federal regulation, CHEA Recognition Standards, and ACCJC Accreditation Standards and policies. See, for example, 34 C.F.R. § 602.23(d); CHEA Recognition Standard 12.B.
institution). Under Commission rules, acceptance of an Eligibility Report does not establish a formal relationship between the Commission and the college. Inquiries about accreditation should be made to the Commission office: ACCJC, 10 Commercial Blvd., Suite 204, Novato, CA 94949, (415) 506-0234.

B. Representation of Status by Candidate Institutions
Institutions that have achieved candidacy status should use the following language in public representations about their relationship with the Accrediting Commission. Note that both paragraphs are required.

(Name of institution) is a Candidate for Accreditation by the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges, 10 Commercial Blvd., Suite 204, Novato, CA 94949, (415) 506-0234, an institutional accrediting body recognized by the Council for Higher Education Accreditation and the U.S. Department of Education. Additional information about accreditation, including the filing of complaints against member institutions, can be found at: www.accjc.org

Candidate for Accreditation is a status of preliminary affiliation with the Commission initially awarded for two years. Candidacy is preaccreditation and does not assure eventual accreditation.

C. Representation of Status by Accredited Institutions
Representations of accredited status should include and be limited to the following statement. Additional modifiers such as “fully accredited” are not appropriate since no partial accreditation is possible.

(Name of institution) is accredited by the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges, 10 Commercial Blvd., Suite 204, Novato, CA 94949, (415) 506-0234, an institutional accrediting body recognized by the Council for Higher Education Accreditation and the U.S. Department of Education. Additional information about accreditation, including the filing of complaints against member institutions, can be found at: www.accjc.org
Institutions that are denied candidacy or initial accreditation, or whose candidacy or accredited status is terminated by the Accrediting Commission for Community and Junior Colleges may request a review of the Commission’s decisions. These actions are identified as the adverse actions which may be taken by the Commission.1 Other Commission actions on accredited status are not subject to review.

A review must be requested prior to the filing of an appeal by the institution. The following procedures will govern the conduct of the Commission’s review:

1. If the Accrediting Commission for Community and Junior Colleges decides to take an adverse action the President will notify the institution concerned of the decision by certified mail, return receipt requested, within 30 calendar days of the Commission’s decision. Said notification shall contain a succinct statement of the reasons for the Commission’s decision.

2. If the institution wishes a review by the Commission, it shall file with the Commission President a request for such a review under the policies and procedures of the Commission. This request should be submitted by the chief executive officer of the institution and co-signed by the Chairperson of the governing board. Requests for review by an institution in a multi-college system shall be co-signed by the chief executive officer of the system. This request must be received by certified mail, return receipt requested, within 28 calendar days of the date of the mailing of the Commission’s notification of its decision to the institution. The fee for review shall accompany the request.

3. Within 21 calendar days after the date of its request for a review, the institution, through its chief executive officer, must submit a written statement of the reasons why, in the institution’s opinion, a review of the Commission’s decision is warranted. As a general rule, this written statement should respond only to the reasons cited by the Commission in its decision and to the evidence that was before the Commission at the time of its decision. In so doing, the institution shall identify the basis for its request for review in one or more of the following areas: (1) there were errors or omissions in carrying out prescribed procedures on the part of the evaluation team and/or the Commission which materially affected the Commission’s decision; (2) there was demonstrable bias or prejudice on the part of one or more members of the

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1 Adverse actions are defined, by 34 C.F.R. §602.3 as “the denial, withdrawal, suspension, revocation, or termination of accreditation or preaccreditation, or any comparable accrediting action an agency may take against an institution or program.” The due process described in this Policy addresses the regulatory requirements of 34 C.F.R. §602.25 as to adverse actions.
evaluation team or Commission which materially affected the Commission’s decision; (3) the evidence before the Commission prior to and on the date when it made the decision which is being appealed was materially in error; or (4) the decision of the Commission was not supported by substantial evidence.

It is the responsibility of the institution to identify in its statement of reasons any specific information that was not considered, or was improperly considered, by the visiting team.

The institution must accompany its statement of reasons with all written documents that the institution requests the Commission consider.

The statement of reasons will be reviewed by Commission staff for compliance with this provision. The staff review will normally be completed within 30 days from receipt of the statement of reasons.

4. If, in the judgment of Commission staff, the statement of reasons is deficient, it will be forwarded to the Commission Chairperson. If the Commission Chair concurs with the judgment of Commission staff that the statement of reasons is deficient, a notice of return and the statement of reasons will be returned to the institution and no review committee will be appointed.

When an institution’s statement of reasons is returned, the institution will be provided the opportunity to revise the statement within 21 days from the date the notice of return and statement of reasons are sent to the institution. Should the institution resubmit its statement of reasons within the prescribed time period, the revised statement will be reviewed by Commission staff. If the revised statement is still found deficient, it will be forwarded to the Commission Chair. Should the Commission Chair concur that the revised statement is deficient, the matter will be considered closed and no review committee will be appointed. This action is final and is not subject to the appeals process.

5. If, on review, the statement of reasons is found to comply with the requirements set forth in item 3, above, the matter will be accepted for review and the institution so notified. On acceptance of the institution’s written statement of reasons, the Commission staff will select a review committee of three or more persons. A roster of the review committee will be sent to the institution normally within 21 calendar days of acceptance of the institution’s statement of reasons. No person who has served as a member of the visiting team whose report is subject to review shall be eligible to serve on the review committee. The institution will be provided the opportunity to object for cause to any of the proposed review committee members. After giving the institution notice of this opportunity, the Commission staff will finalize the membership of the review committee and the committee chair appointment.

6. Within a reasonable period of time after the review committee has been selected, the Commission President will schedule a meeting of the review committee at a location separate from the institution and Commission offices. No assurance can be made that the review committee process will take place so that action on the request for review will be able to be scheduled on the agenda of the next Commission meeting.
a. Prior to the meeting of the review committee, the review committee will review available information. If additional information is needed at any time during the review by the review committee, the Chairperson of the review committee may request such information from the chief executive officer of the institution, Commission staff, or the prior team.

b. The chief executive officer or other institutional representatives will be invited to answer questions and address issues raised in the statement of reasons.

c. The review will be investigative and designed to determine if the grounds for review, cited by the institution, have been met.

d. The review committee may consider only evidence that was available to or known by the Commission at the time of its taking action. New evidence or information relating to actions or events subsequent to the date of the Commission action shall not be presented or considered by the review committee.

7. The committee will prepare a report that states the reasons for the Commission action, identifies each reason advanced by the institution in its request for review, and, for each reason, evaluates the evidence which the institution has presented in support of its request for review. The report may include an evaluation of additional evidence that, in opinion of the review committee, is relevant to its recommendation to the Commission and was before the Commission at the time it rendered its decision. The report shall state only findings of fact, and not consider or cite any evidence relating to facts or events occurring after the date of the Commission’s decision.

a. The Chairperson of the review committee will submit a copy of the review committee's report to the chief executive officer of the institution, the Chairperson of the institution's governing board, and the President of the Commission, normally within 21 calendar days of the end of the review committee's deliberations, via certified mail or other means that provide a receipt of delivery.

b. Within 14 calendar days of the institution's receipt of the review committee's report, via certified mail or other means that provide a receipt of delivery, the chief executive officer may submit a written response to the President of the Commission, with a copy to the Chairperson of the review committee. Failure of the institution to submit a response shall constitute an acceptance by the institution of the review committee's report.

c. After considering the written response, the review committee may make revisions to the review committee report to correct errors of fact or omissions. The revised review committee report will be sent to the chief executive officer of the institution, the Chairperson of the institution's governing board, and the President of the Commission.

8. In a confidential letter to the Commission, the review committee shall recommend whether the decision of the Commission under review should be affirmed, reversed, or modified. The recommendation of the review committee to the Commission will not
be disclosed to the institution being reviewed. The recommendation is not binding on the Commission.

9. The matter will be scheduled for Commission consideration at its next regular Commission meeting.

   a. In making its decision on the institution's status, the Commission will consider the evidence available to it and then reach a final decision to (a) reaffirm its original decision; (b) modify it; or (c) reverse it.

   b. As soon after the meeting as practicable, but not later than 30 days after the Commission decision, the Commission President will notify the chief executive officer of the institution by certified mail or other means that provide a receipt of delivery, of the Commission's decision.

   c. The decision of the Commission shall be the final decision of the Accrediting Commission for Community and Junior Colleges on the action concerning the institution which was under review.

   d. If the decision has affirmed the denial or termination of candidacy or accreditation, the institution may file an appeal with the President of the Commission in accordance with the provisions of Bylaws of the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges, and the Appeal and Hearing Procedures.

10. An institution retains its accredited or candidate status until the review process of the Commission is completed. If the institution files an appeal, its status remains unchanged until the appeal process is completed.

11. The cost of the review will be borne by the institution. The request for a review must be accompanied by a deposit set by the Commission. If the actual cost is less than this amount, the excess will be refunded. If it is greater, the institution will be billed for the difference.
Policy on the Rights and Responsibilities of the Commission and Member Institutions

(Adopted January 2005; Edited August 2007, October 2007; Revised June 2011, June 2012; Edited August 2012; Revised October 2013, January 2014)

Background
Students, the public, higher education bodies, and various levels of government need assurance that an accredited institution is of high quality and possesses integrity. American higher education has chosen to use a voluntary, non-governmental, self-regulatory process to provide this assurance. Such a process must balance institutional autonomy, independence, and freedom with an institution's responsibilities to its various constituencies. Therefore, the process must carefully delineate the rights and responsibilities of both the accrediting bodies and the institutions they accredit. Mutual understanding and respect for the rights and responsibilities of each party will assure that higher education remains fundamentally sound, responsible, responsive, and effective, so that the public may have confidence in the integrity and quality of educational institutions with a minimum need for government regulations.

Policy
The Commission is committed to partnering with a member institution in a voluntary non-governmental accreditation process that results in a mutual commitment to self-regulation, quality assurance to the public, and continuous institutional improvement. The Commission and its member institutions share rights and responsibilities to develop and promulgate Accreditation Standards and an agreed-upon accrediting process for educational quality and institutional effectiveness review (formerly institutional comprehensive review). The institutional Chief Executive Officer is the chief representative of the institution to the Commission. The Commission communicates to the institution primarily through the Chief Executive Officer.

Policy Elements
A. Development and Promulgation of Standards

The Commission has the responsibility to develop standards which are consistent with the purposes of accreditation, which are sufficiently flexible to allow diversity and effective program development, and which allow and encourage institutional/programmatic freedom and autonomy, and allow the institution to exercise its rights within a reasonable set of parameters relevant to the quality of education.

The Commission has the responsibility to provide opportunities for broad participation of affected constituencies in the development and acceptance of the Eligibility Requirements, Accreditation Standards, and Commission policies, and to permit institutional input on new or revised policies by providing for an opportunity for review at public meetings of the Commission and to consider such input from a member institution when making changes to the Eligibility Requirements, Accreditation Standards, and Commission policies.
A member institution has the responsibility to participate in development of the Eligibility Requirements, Accreditation Standards, and Commission policies and in the Commission’s periodic reviews. The Commission has the responsibility to develop and promulgate Eligibility Requirements, Accreditation Standards, and Commission policies that meet the requirements of the U.S. Department of Education (USDE) regarding a member institution’s eligibility for Title IV. The institutional Chief Executive Officer and the Accreditation Liaison Officer have the responsibility to communicate and promulgate information to their institutional constituencies about the Eligibility Requirements, Accreditation Standards, and Commission policies, any changes to them, and the institution’s plans for changes needed to comply with them. A member institution has the responsibility to communicate directly to the Commission any comments or concerns about the Commission’s Eligibility Requirements, Accreditation Standards, and policies.

B. Institutional Records of Accreditation

The Commission has the responsibility to provide, when requested, copies of correspondence pertaining to that institution to the Chief Executive Officer and, when appropriate, to the Accreditation Liaison Officer.

A member institution has the responsibility to develop an effective mechanism to ensure the internal coordination of accreditation activities. A member institution has the responsibility to maintain all correspondence and records on the accreditation history of the institution, and on substantive change applications and the outcomes of the application.

A member institution has the responsibility to share records of the institution’s accreditation history, as appropriate, within the campus community.

C. Information Collection

The Commission has the responsibility to specify items to be addressed in all reports to the Commission, require only information that is relevant to the Eligibility Requirements, Accreditation Standards, and Commission policies, and respect the confidentiality of information required and evaluated in the accreditation process. The Commission also collects information required by USDE regulations.

A member institution has the responsibility to: determine how to design and conduct the institutional self evaluation process, involve broad and appropriate constituent groups in the preparation and process of the Self Evaluation Report of Educational Quality and Institutional Effectiveness, disclose to the Commission all information which is required to carry out the Commission evaluation and accreditation functions and respect the confidentiality of information required and evaluated in the accreditation process.

A member institution has the responsibility to maintain records of formal student complaints and grievances between each review cycle, and make them available to the Commission and evaluation team upon request, in accord with federal regulations. A member institution must submit substantive change proposals for approval by the Commission before such substantive changes are implemented.
D. Site Visits and Reviews

The Commission has the right to: conduct site visits as required under the Commission’s adopted accreditation processes; exercise its discretion whether or not to conduct joint, concurrent, coordinated, consolidated, or phased visits when requested by an institution; and note in its accreditation documents any attempt by professional organizations, collective bargaining groups, or special interest groups to impede or interfere with participation in the educational quality and institutional effectiveness review process and visit. The Commission has the right to monitor and report as required by USDE regulations for recognized accrediting agencies.

A member institution has the right to request the Commission to hold joint, concurrent, coordinated, consolidated, or phased visits; and review the list of proposed evaluation team members in order to avoid potential conflicts of interest.

The Commission has the responsibility to select evaluation team members, who are competent by virtue of experience, training, and orientation, and are sensitive to the unique mission of the institution. Teams will include both academic and administrative representatives. Faculty members will be included among the academic representatives on comprehensive evaluation teams. Prior to the selection of the evaluation team, the Commission will consult with the institution to determine any special needs or concerns. The Commission has the responsibility to assure that evaluation team members are impartial, objective, and without conflict of interest and that the evaluation team is of an appropriate size and composition for the purposes of the site visit. The institution has the right and responsibility to review the evaluation team members and report any conflicts of interest or concerns to the Commission before the team composition is finalized. The Commission has the responsibility to assure that evaluation team members keep confidential all institutional information examined or heard before, during, and after the site visit. The Commission has the responsibility to set the length of a site visit, ordinarily three days for a review and one or more days, as needed, for a follow-up or any other special visit. The Commission has the responsibility to set the dates of the site visit in consultation with the institution.

The Commission also has the responsibility to communicate its findings derived from the site visit to the institution; ensure that the External Evaluation Report of Educational Quality and Institutional Effectiveness (formerly Team Report) identifies and distinguishes clearly between findings, conclusions and recommendations related to deficiencies in meeting the Eligibility Requirements, Accreditation Standards and Commission policies, and those recommendations representing suggestions for quality improvement; provide the Chief Executive Officer of the institution with an opportunity to correct all factual errors in the draft External Evaluation Report; and provide supplemental materials pertinent to the facts and conclusions in the External Evaluation Report before it takes action on the Institutional Self Evaluation and External Evaluation Report.

A member institution has the responsibility to provide maximum opportunity for communication between all relevant constituencies and the evaluation team; and ensure that professional organizations, collective bargaining groups, or special interest groups not impede or interfere with reports, visits, and reviews. A member institution also has the responsibility to make the External Evaluation Report available to the public. A member
institution has the responsibility to acknowledge that specialized accrediting agency recognition, local governmental requirements and/or collective bargaining agreements, in and of themselves, do not abrogate or substitute institutional and employee obligations to comply with the Eligibility Requirements, Accreditation Standards, and Commission policies.

E. Accreditation Decisions

A member institution has the right to withdraw a request for any status of accreditation at any time prior to the decision on that request. A member institution also has the right to appeal an accreditation decision to deny accreditation or to terminate accreditation in accordance with the policies of the Commission and to maintain accredited status during the appeal. A member institution has the right to withdraw from Commission membership by sending a written notice to the Commission of the intent to withdraw as of the end of the institutional semester or term. Ordinarily, the notice must be sent with adequate time for the Commission to approve the request at its next scheduled meeting prior to the anticipated date of withdrawal of accreditation.

The Commission has the responsibility to: permit the withdrawal of a request for any status of accreditation at any time prior to the decision on that request; require an institution voluntarily withdrawing from Commission membership to take appropriate steps to notify its student body, the U.S. Secretary of Education, appropriate state/governmental licensing and authorizing agencies, and the public, and where appropriate to follow the Commission’s “Policy on Closing an Institution”; make decisions solely on the basis of published standards, policies, and procedures using information available and made known to the institution; avoid conflicts of interest in the decision-making process; and ensure the confidentiality of the deliberations in which accreditation decisions are made, and observe due process in all deliberations.

The Commission also has the responsibility to: notify institutions promptly in writing of accreditation decisions and give reasons for the actions; ensure that the communication of the final accreditation decision identifies and clearly distinguishes between recommendations related to deficiencies in meeting the Eligibility Requirements, Accreditation Standards and Commission policies and recommendations representing suggestions for quality improvement; publish accrediting decisions, both affirmative and negative, except for initial denial of candidacy or eligibility (which are not made public); and maintain the confidentiality of the External Evaluation Report until after the Commission has acted on it. The Commission may require that corrective action be taken if an institution releases information misrepresenting or distorting any accreditation action taken by the Commission or the status of its affiliation with the Commission. If the institution is not prompt in taking corrective action, the Commission may release a public statement providing the correct information.

A member institution has the responsibility to accept the Commission’s action after availing itself of its due process rights afforded in Commission policy, and to make public the Commission’s action letter and the External Evaluation Report as well as the Institutional Self Evaluation Report. A member institution has the responsibility to uphold

1 The Commission meets in January and June of each calendar year to take actions on institutions.
the credibility and integrity of the accreditation process by accurately portraying the
Commission’s actions and helping institutional constituencies to understand the Eligibility
Requirements, Accreditation Standards, and Commission policies pertinent to an
accreditation action taken on an institution. A member institution has a responsibility to
respond to evaluation team or Commission recommendations within the time parameters
set by the Commission.

F. Third Party Comment

A third-party comment may be submitted to the Commission at any time as it relates to
the compliance of a member institution with Eligibility Requirements, Accreditation
Standards, or Commission policies. Such comment must be submitted in writing, signed,
and accompanied by the affiliation, return address and telephone number of the
correspondent. Commission staff will review all third-party comment to assess its
applicability to Eligibility Requirements, Accreditation Standards, or Commission policies.
Institutions will be provided with an opportunity to review applicable third-party
comment. An applicable third-party comment will be provided to the Commission.

A third-party comment also assists the Commission as it considers applications for
reaffirmation of accreditation. When an institution is undergoing a review, the Commission
requires the institution’s chief executive officer to notify the campus community and public
of the opportunity for submission of third-party comments and the process for doing so. In
such cases, third-party comment should be received by the Commission no later than five
weeks before the scheduled Commission consideration or meeting.

G. Follow-Up

The Commission has the right to take action to assure that a member institution meets its
responsibilities and to request periodic reports, special reports, annual reports, additional
visits, and consultative activities relevant to the institution’s accreditation status. The
Commission has the right to request the reevaluation of an institution at any time as a
means for monitoring specific developments within an institution between comprehensive
evaluations.

If a member institution fails to make complete, accurate and honest disclosure of
information required by the Commission, or if the institution does not comply with
Commission requests, directives, decisions and policies, and make complete, accurate,
and honest disclosure, then the Commission may act to impose a sanction, or to deny or
revoke candidacy or accreditation.

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2 If it is determined, in the review of the third party comment, there is the need to hold the contact
confidential for legal, investigative or other purposes, then the institution will not be notified of the
report made. Also, if the U.S. Department of Education requests certain reported information remain
confidential, then there will be no notification to the institution. 34 C.F.R. § 602.27(b).

3 Eligibility Requirement 21. See also the Policy on Public Disclosure and Confidentiality, § II: “If an
institution conducts its affairs so that it becomes a matter of public concern, misrepresents a
Commission action, or uses the public forum to take issue with an action of the Commission relating to
that institution, the Commission President may announce to the public, including the press, the action
taken and the basis for that action, making public any pertinent information available to the
Commission.”
H. Special Report and Visit

The Commission requests a Special Report when it receives information that raises significant concerns about the institution’s compliance with Eligibility Requirements, Accreditation Standards, and/or Commission policies. The institution may be required to provide a narrative report, evidentiary documents, and/or documents prepared by external third parties, such as external audits. The Commission may require a team visit, which will be scheduled after the due date for the Special Report. The Commission’s letter requesting a special report will identify all specific requirements to be addressed by the institution.

The Commission has the responsibility to provide written notice to the institution of the action taken in relation to a special report or visit, support improvement of the educational effectiveness of an institution, and work with the institution to identify appropriate assistance.
Policy on the Role of Accreditation Liaison Officers

(Adopted June 2012)

Background
The Commission regularly communicates with institutions about matters of policy and institutional quality. By policy, the Commission communicates with institutions through the Chief Executive Officer (CEO). Institutions also need a designated Accreditation Liaison Officer (ALO) to be a second point of contact with the Commission, to maintain institutional records of accreditation activities, and to help to organize institutional responses to Eligibility Requirements, Accreditation Standards and Commission policy requirements.

Policy
The institution’s Chief Executive Officer shall identify an Accreditation Liaison Officer and send the individual’s name to the Commission office. The ALO assists the CEO in addressing accreditation matters and serves as the second contact person for the Commission staff. The institution must inform the Commission immediately if there is a change in the ALO.

Policy Elements
The main roles of the ALO are to:

- stay knowledgeable about accreditation, including the Eligibility Requirements, Accreditation Standards and Commission policies;
- promote an understanding of accreditation requirements, quality assurance, and institutional effectiveness among constituencies at the college;
- communicate information about accreditation and institutional quality that is available from the ACCJC, including letters sent to the institution and materials posted to the ACCJC’s website;
- serve as the key resource person in planning the institutional self evaluation process;
- manage procedures to assure that the institution maintains the comprehensive collection of institutional files containing Commission information including previous external evaluation reports and action letters;
- prepare the institution for an evaluation team site visit in collaboration with the team Chair and the team assistant;
- maintain regular communication with the CEO and the college on accreditation matters;
- facilitate timely reports to the Commission, including Annual Reports and Substantive Change Proposals;
- attend ALO training; and
- in multi-college districts or systems, communicate with appropriate system staff and ALOs at other campuses to engage in system-wide quality improvement, to coordinate reports to the Commission and evaluation team site visits.
Accreditation by the Accrediting Commission of Community and Junior Colleges, Western Association of Schools and Colleges is an expression of confidence that an institution is satisfactorily achieving its objectives, and that it meets or exceeds the Commission's Eligibility Requirements, Accreditation Standards and abides by Commission policies. The Commission is concerned with institutional integrity and with performance consistent with Accreditation Standards and policies. While it cannot intervene in the internal procedures of institutions or act as a regulatory body, the Commission can and does respond to complaints regarding allegations of conditions at affiliated institutions that raise significant questions about the institution’s compliance with the Accreditation Standards expected of an accredited institution.

The Commission does not consider allegations concerning the personal lives of individuals connected with its affiliated institutions. It assumes no responsibility for adjudicating isolated individual grievances between students, faculty, or members of the public and individual institutions. The Commission will not act as a court of appeal in matters of admission, granting or transfer of academic credit, grades, fees, student financial aid, student discipline, collective bargaining, faculty appointments, promotion, tenure and dismissals or similar matters.

The Commission requires that each accredited institution have in place student grievance and public complaint policies and procedures that are reasonable, fairly administered, and well publicized. A complainant filing a complaint with the Commission should demonstrate that a serious effort has been made to pursue all review procedures provided by the institution.

Complaints are considered only when made in writing, when the complainant is clearly identified, and the complainant’s address is included. Substantial evidence should be included in support of the allegation that the institution is in significant violation of the Eligibility Requirements, Accreditation Standards and Commission policies. Such evidence should state relevant and provable facts.

When the Commission receives a complaint about a candidate or accredited institution, it reviews that information to determine if it is relevant to the compliance of that institution with Eligibility Requirements, Accreditation Standards and Commission policies. If appropriate, such information may be referred to the institution and/or to the visiting team next scheduled to evaluate the institution. The Commission at all times reserves the right to request information of an affiliated institution and to visit that institution for purposes of fact-finding, consistent with Commission policy. If Commission investigation yields credible evidence that indicates a systemic problem that calls into question the institution’s ability to meet Eligibility Requirements, Accreditation Standards and Commission policies, the Commission may invoke the sanctions provided for in policy.
Procedures

1. Within ten days of the receipt of a complaint it will be acknowledged in writing and initially reviewed by the staff of the Commission.

   It is the complainant's responsibility to do the following:
   a. State the complaint in the clearest possible terms.
   b. Provide, in writing, a clear description of the evidence upon which the allegation is based.
   c. Demonstrate that all remedies available at the institution (grievance procedures, appeals, hearings, etc.) have been exhausted. The complainant should describe what has been done in this regard.
   d. Acknowledge awareness that Commission staff may send a copy of the complaint to the president of the institution.
   e. Include name and address.
   f. Sign the complaint.

2. Within ten days of the receipt of a complaint it will be acknowledged in writing and initially reviewed by the staff of the Commission. Individual complaints, whether acted upon or not by the Commission, will be retained in Commission files.

3. If the Commission staff finds the complaint to be not within the scope of Commission policies and jurisdiction, the complainant will be so notified.

4. If the complaint appears to be within the scope of Commission policies and jurisdiction, and is substantially documented, a copy of the complaint will be forwarded to the institution's chief executive, who will be asked to respond to complaint by addressing a letter and any supporting evidence to the Vice President of the Commission within thirty days.

5. The Commission staff will review the complaint, the response, and evidence submitted by the institution's president, and will determine one of the following:
   a. That the complaint will not be processed further. The complainant will be so notified within ten days.
   b. That the complaint has sufficient substance to warrant further investigation. If the Commission decides to investigate a complaint, it will inform the complainant of its decision to investigate at the same time it informs the institution of its intent to investigate.

6. As part of its investigation, the Commission may request information of the institution and may send representatives to visit that institution for purposes of fact-finding. The Commission may also request information of other agencies that accredit the institution or authorize it to operate, and of the U.S. Department of Education. If further investigation is warranted, the time to conduct the investigation may vary considerably depending on the circumstances and the nature of the complaint.
7. The Commission will prepare a Report of the Findings of the Complaint Investigation. Prior to the Commission’s disposition of the complaint, the institution will have an opportunity to respond in writing within thirty days to the findings of the investigation.

8. The Commission will consider the Complaint, the Report of the Findings of the Complaint Investigation, and any institutional response to the findings of the investigation in reaching a disposition on the Complaint. Although every effort will be made to expedite a decision, it is not possible to guarantee a specific time frame in which the process will be completed.

9. If the Commission’s deliberations conclude that there is credible evidence that the institution is not meeting Accreditation Standards or complying with Commission policies, the Commission may (a) provide directives to the institution to take immediate corrective actions, or (b) invoke any of the sanctions provided for in policy. The Commission will also schedule appropriate monitoring of the institution’s subsequent response, including calling for Special Reports and visits by Commission representatives.

10. The decision is final and will be communicated by the Vice President of the Commission to the institution and the complainant. If the complaint was referred to ACCJC by another agency, the Commission will provide that agency with copies of correspondence that state the outcome of the complaint within ten days of the Commission decision on the disposition of the complaint. The Commission will also provide the U.S. Department of Education notice of the disposition of any complaint that directly or indirectly affects an institution’s eligibility for Title IV funds.

11. The Commission will keep a record of student and public complaints against member institutions. Commission staff will report to the Commission annually regarding the status and resolution of student and public complaints against member institutions. At the time of an institution’s comprehensive evaluation, a summary of any complaints will be provided to the team chair for consideration by the evaluation team.

Policy on Student and Public Complaints Against Institutions
Background
The U.S. Department of Education regulations require that accrediting agencies have adequate policies and procedures to ensure that any substantive changes to the educational mission, or programs of an institution, maintain the capacity of the institution to continue to meet Accreditation Standards. Membership of the Substantive Change Committee is set forth in the ACCJC Bylaws and represents the composition of academic and administrative personnel, and of public representatives, required of decision-making bodies by the U.S. Department of Education.¹ In addition, educators with specialized expertise may be invited to serve as expert advisors to the committee to facilitate consideration of substantive change applications involving programs or single-purpose institutions that prepare students for a specific profession.

Federal law mandates that accrediting agencies require institutions to obtain accreditor approval of a substantive change before the change is included in the scope of the accreditation granted to the institution. The scope of an institution’s accreditation covers all activities conducted in its name.

Policy
The Commission, through its substantive change process, ensures that institutions continue to meet the Standards. The substantive change process requires evidence of institutional planning, resource commitment to the proposed change, and evidence that following the change the institution continues to meet the Eligibility Requirements, Standards, and Commission policies.

It is the institution’s responsibility to demonstrate the effect of a substantive change on the quality, integrity, capacity and effectiveness of the total institution. Substantive changes must be approved by the Commission prior to implementation.² The Committee will not approve a substantive change to be effective on a date prior to its action on the substantive change. The Commission approval of a substantive change proposal will be effective on the date the Substantive Change Committee votes affirmatively to approve the change.

The Commission publishes a Substantive Change Manual that describes the approval process. The institution’s accreditation will be extended to areas affected by the change upon review and approval by the Commission. Major substantive changes or the area potentially affected by the substantive change may cause the Commission to decide whether an educational quality and institutional effectiveness review (formerly comprehensive review) or site visit is required to

¹ 34 C.F.R. § 602.15(a)(3).
² 34 C.F.R. § 602.22.
make a determination regarding the substantive change\textsuperscript{3}. Situations which may trigger this determination include:

\begin{itemize}
\item change of ownership/control/legal status during reaffirmation of accreditation or candidacy status;
\item complete or significant change in mission and/or a significant change of mission sought within two years of a change of ownership and change of control;
\item any relocation coupled with a change of mission;
\item a change of classification from an off-site location to a stand-alone institution;
\item significant departure from meeting the Eligibility Requirements (ERs), Accreditation Standards and/or Commission policies;
\item a site visit, special visit or special report that indicates noncompliance with the ERs, Accreditation Standards or Commission policies;
\item evidence of unethical practices;
\item student indebtedness compared to program, job market, and salary;
\item poor student graduation rates, program quality, performance and/or program outcomes;
\item closure of a program or institution due to loss of state authorization or licensing;
\item lack of effective educational policies and practices;
\item rapid growth in the number of sites where more than 50\% of an educational program is offered;
\item any change that results in the transition to a 100\% distance education institution; or
\item other circumstances and the accumulation of changes wherein the Commission concludes the institution, to which it granted accreditation, has effectively ceased to operate under the conditions upon which that grant of accreditation was based.
\end{itemize}

Institutions may not submit a Substantive Change Proposal in the six-month period preceding the site visit. The Commission may defer consideration of a substantive change request if an institution is on a sanction such as Warning, Probation, or Show Cause until the conditions that caused the Commission to defer a decision or to impose a sanction have been resolved and the Commission has reaffirmed accreditation.

\textsuperscript{3} 34 C.F.R. § 602.22(a)(3) Comprehensive evaluations triggered by a major substantive change will proceed in the same manner as a regularly scheduled comprehensive evaluation, with an institutional self evaluation report, external evaluation and report, and action by the Commission on the accredited status of the institution.
Substantive Changes include, but are not limited to, the following:

Change in Mission, Objectives, Scope, or Name of the Institution

- a change in the mission or character of the institution; if the mission or character of the institution becomes dramatically different, the Commission reserves the right to require the institution to complete the eligibility, candidacy, and initial accreditation process
- a change in the degree level from that which was previously offered by the institution, i.e., offering a degree at a level higher than the accredited institution offers currently
- any change in the official name of the institution
- a merger of two separately-accredited ACCJC institutions into a single accreditable institution
- a reduction of programs to an extent that the institution’s mission cannot be accomplished

Change in the Nature of the Constituency Served

- a change in the intended student population
- closure of an institution or loss of state authorization or licensure for the institution or a program
- closure of a location geographically apart from the main campus at which students can complete at least 50% of an educational program
- courses or programs offered outside the geographic region currently served

Change in the Location or Geographic Area Served

An institution that moves to a new location or opens a new location geographically apart from the main campus where students can complete 50% or more of a program constitutes a substantive change. The Commission will determine if an institution applying for substantive change for a new location requires a site visit. The Commission will determine if an institution may be exempted from the requirement of a site visit if the following conditions are met:

- An institution has successfully completed at least one cycle of accreditation of maximum length offered by the Commission (six years) and one renewal or has been accredited for at least ten years and has three additional locations already approved by the Commission through the substantive change process.

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4 See the Policy on Closing an Institution for a fuller discussion of requirements related to closing an institution and teach-out plans for institutional or programmatic closures.

5 If the new location meets the definition of a branch campus, then a site visit will be required. A branch campus is defined in 34 CFR 600.2 as a location of an institution that is geographically apart and independent of the main campus of that institution and that (1) is permanent in nature; (2) offers courses in educational programs leading to a degree, certificate, or other recognized educational credential; (3) has its own faculty and administrative or supervisory organization; and (4) has its own budgetary and hiring authority. [Emphasis added.] In addition to other items of review for new locations, the Commission will review the business plan for a branch campus in determining whether to approve a substantive change or not.
• The institution has demonstrated sufficient capacity to add additional locations without individual prior approvals, including at a minimum satisfactory evidence of a system to ensure quality across a distributed enterprise that includes: clearly identified academic control; regular evaluation of the locations; adequate faculty, facilities, resources, and academic and student support systems; financial stability; and long-range planning for expansion.

The Commission must determine the institution’s fiscal and administrative capacity to operate the additional location. In addition, the Commission shall arrange a visit, within six months of review, to each additional location the institution establishes if the institution has a total of 3 or fewer additional locations, has not demonstrated to the Commission’s satisfaction that it has a proven record of effective educational oversight of additional locations or has been placed on sanction by the Commission. 34 C.F.R § 602.22(c). The purpose of the site visits is to verify that the additional location(s) has the personnel, facilities, and resources the institution claimed to have in its application to the Commission for approval of the additional location(s).

The Commission may not approve an institution’s addition of locations after the institution undergoes a change in ownership resulting in a change of control as defined in 34 C.F.R. § 600.31 until the institution demonstrates that it meets the conditions for the agency to pre-approve additional locations described in 34 C.F.R. § 602.22.

Change in the Control or Legal Status of the Institution

• any change in the form of control, legal status, or ownership of the institution
• a merger with another institution6
• the separation of one unit of the institution into separate institutions, dividing an institution into two or more separately controlled and accredited units
• the acquisition of any other institution or program or location of another institution, and/or the addition of a permanent location at the site of a teach-out the institution is conducting
• contracting for the delivery of courses or programs in the name of the institution with a non-regionally-accredited organization
• a change by a parent institution of one of its off-campus sites into a separate institution

Change in Courses or Programs or their Mode of Delivery that Represents a Significant Departure from Current Practice

• a change in the mode or location of delivery when the courses constitute 50% or more of a program, degree or certificate and/or are offered at a new or different location or through distance education or correspondence education for the total amount of credits awarded for courses or programs; addition of courses that constitute 50% or more of a program or 50% of the institution’s courses offered through a mode of distance or electronic delivery

6 See also Policy on Contractual Relationships with Non-Regionally Accredited Organizations
• the addition of courses or new programs that represent a significant departure from existing offerings of educational programs or methods of delivery from those that were offered when the institution was last evaluated
• addition of programs of study at a degree or credential level different from that which is included in the institution’s current accreditation or preaccreditation

A Change in Credit Awarded
• a substantial increase or decrease in the number of clock or credit hours awarded for the successful completion of a program
• a change from clock hours to credit hours
• a change in rigor of the credit hour

Implementation of a Direct Assessment Program
• an instructional program that, in lieu of clock hours or credit hours, utilizes direct assessment of student learning
• an instructional program that recognizes the direct assessment of student learning by others
• a program that must obtain USDE approval as a direct assessment program under 34 C.F.R. § 668.10

A Contractual Relationship with a Non-Regionally-Accredited Organization
A contractual relationship with a non-regionally-accredited organization is considered a substantive change when more than 25 percent of one or more of the accredited institution’s educational programs is offered by the non-regionally-accredited organization. 34 C.F.R. § 602.22(a)(2)(vii).
Policy on Transfer of Credit
(Adopted January 2005; Revised January 2010)

Background
Students experience transfer of credit as an issue critical to the successful completion of their educational goals. The majority of students attending two-year and community colleges typically attend more than one institution before completing their degree or certificate program. In addition, a large proportion of students seeking degrees or certificates will desire to pursue higher education at some time in the future.

Many factors contribute to student attendance at multiple institutions of higher learning;

- Economic, geographic and employment mobility;
- Desire to transfer distance learning credits to site-based institutions;
- Desire to transfer credit for experiences gained from employer training programs;
- Desire to transfer credits from foreign institutions.

These situations necessitate clear institutional policies on how academic credit is awarded and on how students can transfer academic credit. Institutions need to be flexible and open in considering alternative approaches to facilitating transfer of credit to benefit students.

ACCJC is committed to:
- Enhancing educational opportunity by facilitating student mobility;
- Helping institutions to develop effective transfer of credit practices;
- Assuring that institutional transfer of credit practices are consistent with Accreditation Standards and policies;
- Maintaining effective communication between the Commission and member institutions in order to facilitate institutional adherence to Standards and policies and support improvement of transfer of credit between institutions.

Policy
Accredited institutions have a responsibility to provide for effective transfer of credit that minimizes student difficulties in moving between institutions while assuring the high quality of their education. Each institution is responsible for determining its own policies and practices with regard to the transfer and award of credit including transfer of credits from non-accredited institutions. Institutions shall establish policies on the transfer of credit that are clearly stated and that function in a manner that is fair and equitable to students. At the same time, institutions shall be responsible for careful evaluation of credits that students wish to transfer. Institutions must balance responsiveness to students’ preferences about transfer of credit and institutional commitment to the value and quality of degrees, certificates, or other credentials that the receiving institution awards.
Policy Elements
Institutions considering transfer of credit from another institution must evaluate and ensure that:

- There is a balanced approach to decisions about whether to accept transfer of credit. Clearly stated policies and procedures for consideration of transfer of credit must be developed, followed, and maintained. Sound mechanisms for ongoing review and updating of policies and procedures must be established. The policy must include a statement of criteria established by the institution regarding the transfer of credit earned at another institution of higher education;
- The educational quality of the sending institution is the primary consideration. Receiving institutions must ensure that decisions are based on a fair assessment of the institution’s educational quality and may include the regional, specialized and national accredited status of an institution, along with other factors as appropriate. Institutions should be flexible and open in considering alternative or innovative forms of educational delivery that may characterize the institution where the student received the credits proposed for transfer;
- There is assurance that the institution from which a student desires to transfer credit is a legitimate institution accredited by a U.S. Department of Education recognized accrediting body or that the institution, if in another country, is approved by the legitimate accreditation or quality assurance agencies that operate in that country;
- There is assurance that transcripts and other credentials provided for purposes of transfer of credit are legitimate and, if validated by a third party foreign credential services, that the credential service agency is valid;
- The nature, content, associated student learning outcomes, and level of credit(s) earned at the sending institution are comparable to those of the credit(s) offered at the receiving institution;
- The credit(s) earned for the programs offered by the sending institution, in light of the student’s educational goals, are appropriate and applicable to the credits the student seeks to transfer to the receiving institution’s program;
- The receiving institution acts consistently and fairly in its review of the courses that students propose to transfer for credit. Students must be treated equitably as they seek to transfer credit, and institutions must consider all requests to transfer credit carefully before making decisions; and,
- College publications used to inform or recruit students provide accurate and timely information about transfer of credit policies and procedures to students, the public, and sending institutions. The information should include clearly defined procedures, deadlines, and documents needed from sending institutions when attempting transfer of credit as well as essential academic factors that are involved in transfer of credit decisions (such as existing course equivalencies, content and/or student learning outcomes, grades, course level and applicability toward a degree, certificate, or program prerequisite). These policies must be publically disclosed.

1 Required by the Higher Opportunities Education Act as amended.
2 ACCJC recommends that AACRAO services be used.
Effective public communication is maintained through an ongoing exchange with students and the public about transfer of credit opportunities and limitations through catalogues, counseling and advising, and websites. Ongoing contact and information exchange among institutions that routinely send and receive transfer students must be sustained. Information to students and the public about special circumstances that may affect the ease or difficulty of transfer of credit shall be provided.

Where software or a website is used to offer customized transfer of credit information or information on articulation agreements to students, it is accurate and current. Where provision is made for electronic transfer of credit, application for transcript analysis, or other key functions, it is confidential, secure, accurate and current.
Commission Operational Policies and Documents
ARTICLE I
PURPOSE

Section 1. Name
The name of this nonprofit corporation shall be the Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges. This corporation shall be referred to throughout these bylaws as ACCJC.

Section 2. Purpose
ACCJC is a nonprofit, public benefit corporation and is not organized for the private gain of any person. It is organized under the Nonprofit Public Benefit Corporations Law of the State of California for public and charitable purposes. Those public purposes include improving and validating the quality of post secondary education at public and private educational institutions, with a focus on community colleges, career and technical colleges, and junior colleges, through the creation and application of standards of accreditation and related policies, and through a process of review by higher education professionals and public members. ACCJC’s evaluation of institutions assures the educational community, the general public, and other organizations and agencies that an institution has clearly defined objectives appropriate to higher education; has established conditions under which their achievement can reasonably be expected; appears in fact to be accomplishing them substantially; is so organized, staffed, and supported that it can be expected to continue to do so; and demonstrates that it meets ACCJC’s Eligibility Requirements, Accreditation Standards and Commission policies. ACCJC encourages and supports institutional development and improvement through an institutional self-evaluation using the Accreditation Standards, Eligibility Requirements and Commission policies, as well as Midterm, Follow-Up, and Special Reports, and periodic evaluation of institutional quality by qualified peer professionals.

Section 3. Principal Office
The principal office of ACCJC is located at 10 Commercial Blvd, Suite 204, Novato, CA, 94949, or at such other location as the ACCJC shall decide. The ACCJC may establish branch or subordinate offices.
ARTICLE II
ACCREDITED INSTITUTIONAL MEMBERSHIP

Section 1. Member Institutions
The members of ACCJC shall consist of the institutions that it has accredited, and membership shall be granted automatically upon the initial accreditation of an institution. Membership shall thereafter continue for so long as the institution remains accredited, complies with these bylaws and remains current on payment of any dues or special assessment obligations. Institutions that receive candidate (pre-accredited) status, have achieved initial association with the ACCJC and may so identify themselves to the public. In the event an institution loses its accreditation for any reason, its membership status shall cease immediately. In the event an institution resigns its membership, its accredited status shall cease immediately and none of the review or appeal rights which might otherwise be applicable shall apply.

Section 2. Scope
The ACCJC accredits institutions in California, Hawaii, the Territories of Guam and American Samoa, the Commonwealth of the Northern Marianas, the Republic of Palau, the Federated States of Micronesia, and the Republic of the Marshall Islands, which have as a primary mission the granting of associate degrees, but which may also award certificates and other credentials, including bachelor’s degrees within the institution’s mission. The ACCJC may accredit non-domestic institutions in other geographic regions at its discretion.

ARTICLE III
THE COMMISSION

Section 1. Membership
The Commission consists of nineteen members, all of whom are elected by the member institutions, as described in Article IV. One Commission member shall represent the California Community Colleges Chancellor’s Office and shall be selected from among the nominees provided by the California Community Colleges Chancellor. One Commission member shall represent the system office of the University of Hawai‘i Community Colleges and shall be selected from among the nominees provided by the University of Hawai‘i Community College Vice President for Community Colleges. At least five of the Commission members shall be academic representatives who are faculty; at least three (the precise number of whom shall at all times represent at least one seventh of the total membership of the Commission) shall be representatives of the public; at least three members shall be administrative representatives who are two-year college administrators; at least one member shall represent independent institutions; at least one member will represent secondary educational institutions accredited by the Accrediting Commission for Schools, Western Association of Schools and Colleges; at least one member will represent four-year colleges and universities accredited by the Accrediting Commission for Senior Colleges and Universities, Western Association of Schools and Colleges; at least one member shall represent institutions in the American Affiliated Pacific Islands; and a maximum of two Commission members will meet the definition of an Affiliate Member. A representative of the public is someone who is not: an employee, member of the governing board, owner, shareholder, or consultant to an institution that has applied for or is in candidacy or is accredited by the ACCJC; a member of
any trade association or membership organization related to, affiliated with, or associated with the agency; or a spouse, parent, child, or sibling of such individuals. An Affiliate Member shall be a person who does not qualify under any of the other categories enumerated in the preceding sentence but who shall nonetheless be deemed to have expertise or skills that will add meaningfully to the Commission.

Section 2. Election of Commissioners
Commissioners are elected for staggered three-year terms. Appointments are limited to two three-year terms unless the person is elected an officer for a term which extends beyond a sixth year, in which case an additional three-year term or a term of the length necessary to complete service as an officer may be served. Regular appointments are effective on July 1 of the first year and end on June 30 of the last year of a Commissioner’s term.

A Commissioner elected to a membership category defined by position or status is expected to maintain that status for the entire term. If the Commissioner’s position or status changes during a term so that the Commissioner no longer meets the requirement for the category to which elected, the Commissioner shall notify the Commission’s chair or President in a timely manner. A Commissioner whose status has so changed is considered to have completed the term on the date that the new status is actually assumed, except that a Commissioner who holds an administrative or faculty position on the Commission and elects to retire will, upon review and approval of the Commission Chair, be permitted to complete the academic year of service as a Commissioner.

Section 3. Vacancies During a Term
If the position of a Commissioner becomes vacant, whether through resignation, removal, separation from his/her institutional affiliation, or death, the Nominating Committee shall be promptly notified. The Nominating Committee shall, at its sole discretion, either recommend to the Commission a replacement to serve out the remainder of the term of the position vacated or have the position filled at the next regularly scheduled election as described in this Article IV. In recommending a person to fill a vacancy, the Nominating Committee should consider, but not be limited by, the list of those persons previously proposed by the presidents of constituent institutions.

Section 4. Other Vacancies
Except as otherwise provided in Section 3 of this Article, Commission vacancies will be filled through the Commissioner Election Process described in Article IV of these Bylaws. Anticipated vacancies will be announced at the winter meeting for Commission terms due to expire at the end of the following June. Notice of Commission vacancies will be sent to the chief executive officers, accreditation liaison officers, and academic senate presidents of all member institutions, districts and systems; major organizations; and individuals known to have expressed interest. The notice will include the positions open for election, the Commissioners eligible for election, and the deadline for receipt of applications. Institutional and organizational representatives may submit nominations. Individuals may also submit applications. Applications are considered to be in effect for one year.
All individuals that wish to be considered will complete application materials required by the Commission. All applicants and nominees, including Commissioners seeking re-election, will be asked to submit the following:

   a. A letter of application stating the basis for interest in the Commission.
   b. A completed ACCJC data/biographical form. (Service as a Commissioner will be considered for Commissioners seeking a second term.)

Individuals who are seeking initial appointment to the Commission will be asked to submit a resume and two letters of recommendation.

Section 5. Removal of a Commission Member
Commissioners may be removed by two-thirds vote of the Commission for failure to exercise their responsibilities in accordance with the Commission policy on Professional and Ethical Responsibilities of Commission Members or for conduct which is detrimental to the purposes of the Commission.

Section 6. Resignation
A Commissioner may resign at any time and such resignation shall become effective upon such Commissioner providing written notice to the Chair, President, or Secretary of ACCJC.

ARTICLE IV
COMMISSIONER ELECTION PROCESS

Section 1. Nominating Committee
There shall be a Nominating Committee, the purpose of which shall be to nominate persons to serve on the Commission. The Nominating Committee shall consist of eight (8) persons, and shall serve for two years. The Executive Committee shall appoint four Commissioners and four individuals from member institutions to the Nominating Committee. The Chair and Vice Chair of the Commission may not serve on the Nominating Committee. The Nominating Committee will be chosen to represent the broad interests of the Commission’s member institutions. At least one such appointment shall be a current or former public member (§602.3) of the Commission. The Executive Committee shall select the Chair of the Nominating Committee. The names of individuals appointed to the Nominating Committee shall be reported to the member institutions by the Commission.

Section 2. Solicitation of Commission Applicants
The Commission shall notify the members of the Nominating Committee of the number and types of Commissioners to be selected and of any special considerations pertaining to such vacancies. The Commission shall write to all of the Presidents/Chancellors of the Commission’s member institutions, the President of the Accrediting Commission for Senior Colleges and Universities (ACSCU) and the Executive Director of the Accrediting Commission for Schools (ACS), the chief executive officers, accreditation liaison officers, and academic senate presidents of all member institutions, districts and systems, and major organizations, and individuals known to have expressed interest, listing the number and nature of any positions to be filled and soliciting nominees for the projected vacancies. To be considered the nominations must be returned by the date and time established by the Commission.
Members of the Nominating Committee are ineligible for nomination to the Commission while serving on the Nominating Committee. The Nominating Committee shall review the nominees’ qualifications, and shall prepare a slate of candidates, with one candidate being recommended for each position. In preparing such a slate, the Nominating Committee shall consider the need to meet the membership requirements of the Commission as outlined in Article III of the Bylaws, as well as the following:

- Representatives from the entire area served by the ACCJC, including California, Hawai‘i, Guam, American Samoa, the Republic of the Marshall Islands, the Federated States of Micronesia, the Republic of Palau and the Commonwealth of the Northern Marianas.

Diversity in institutional characteristics, such as mission, size, geography, and location, and personal characteristics, such as ethnicity and gender, are considered by the Nominating Committee in reviewing applications. The Committee may not nominate applicants from institutions which already have a sitting Commissioner and will not nominate two applicants from the same institution.

Section 3. Nominations At Large

The notice to the Presidents/Chancellors informing them of the slate of the Nominating Committee shall also include a notice of the right of the Presidents/Chancellors to nominate candidates on an at-large basis for the vacant positions on the Commission within the time frame established by the Commission. To be added as an at-large candidate, a candidate must have the written endorsement of ten (10) or more Presidents/Chancellors. An at-large candidate may not be placed on the ballot if a sitting Commissioner is from the same institution or if the nominating committee has recommended an applicant from the same institution for a different position on the Commission. Presidents/Chancellors should also be mindful of the desired diversity in institutional and personal characteristics of Commissioners in nominating at-large candidates.

Section 4. Election

The ACCJC shall send a ballot to the President/Chancellor of each member institution which shall include the slate of the Nominating Committee and any candidates at-large. Each President/Chancellor shall be asked to vote for or against the slate, or for any at-large candidates nominated by the process described in Section 3 in lieu of those individuals on the Nominating Committee’s slate. To be considered, ballots must be returned to the ACCJC offices within the time frame established by the Commission. Ballots received after the cutoff date will not be counted. Ballots shall be handled by the ACCJC executive staff in a manner to preserve, insofar as practicable, the privacy of persons voting and the institutions they represent. Measures shall be taken by the executive staff to assure the validity of all ballots. The executive staff shall be responsible for the preservation of ballots and tally sheets, which shall be preserved for a period of one hundred eighty (180) days after the election is announced, absent a challenge to an election, in which case the ballots shall be preserved until the challenge is resolved. A challenge to the election results can be brought by any President/Chancellor of a member institution. Any challenge to the election results must be received by the Chair of the Commission within fourteen days after the announcement of the election results. The Chair shall refer the challenge to the Nominating Committee which shall have the authority to make a final decision on the matter.
Section 5. Counting the Ballots
The counting of the ballots shall take place at the ACCJC offices and shall be conducted by the executive staff. The persons receiving the highest number of votes shall be elected to the Commission. In the event of a tie, which prevents the seating of one or more vacant positions, there shall be a runoff of those persons who tied. All persons receiving more votes than those who tied shall be considered seated and shall not participate in the runoff. The runoff shall be by electronic means or mail and shall be conducted according to time frames established by the Commission. The results of the election shall be announced as soon as practicable thereafter. Every effort shall be made to complete the process by mid-May.

ARTICLE V
COMMISSION MEETINGS

Section 1. The Time and Place
The Commission shall meet in regular session twice each year to consider the accredited status of institutions evaluated since the previous meeting and to address such policy and organizational business as shall come before it. Written notice of the time and place of meetings, and a preliminary agenda shall be mailed to the chief executive officer of each member institution, normally 45 days prior to the date of each meeting. At its discretion, the Commission may schedule such additional meetings as it deems necessary.

Section 2. The Agenda
Consideration of the accredited status of institutions and other confidential matters concerning member institutions will take place in Closed Session. ACCJC personnel matters will be considered in Executive Session as will any matter where it has been deemed necessary to consult with legal counsel.

All institutional policy language being considered for Commission approval as first or second readings, and all language revising Accreditation Standards, shall be considered in public session. Observers are provided the opportunity to address the Commission in accordance with the Commission Policy on Access to Commission Meetings.

Section 3. Minutes
The Commission shall maintain minutes of all of its meetings. The Commission Chair, in consultation with the President, shall designate those subjects which are to be discussed in executive, closed and public sessions.

Section 4. Commission Actions
At the call of the Commission Chair, and subject to prior consent setting forth such action by two-thirds of the Commission then in office, executed in writing, FAX, e-mail, telephone, or other electronic means, actions required or permitted to be taken at a meeting of the Commission may be taken without a meeting. Such consent, the reasons therefore, and the substance of the Commission action is filed with the minutes of proceedings of the Commission.
Section 5. Operational Policies
From time to time, the Commission may adopt, amend, or repeal policies that deal with the internal operation of the ACCJC and its staff. Action on such policies may take place at any Commission meeting, in open or closed session, and do not require two readings.

ARTICLE VI
THE BOARD OF DIRECTORS

Section 1. Composition of the Board of Directors
The Board of Directors shall at all times consist of those individuals elected to the Commission pursuant to Article III. The initial directors of ACCJC shall be the individuals identified under Article III, Section 7, who shall also be named as directors in the Action by Incorporator, filed with the minutes of the Board of Directors (“Board”). The Board and the Commission shall at all times constitute the same body and shall consist of the same individuals; however, the Board shall be referred to as the Commission when it is meeting on matters concerned with the accreditation of its Members.

Section 2. Authority and Responsibility of the Board of Directors
The direction and management of the affairs of ACCJC and the control and disposition of its properties and funds shall be vested in the Board. All powers, duties and functions of ACCJC, conferred by the Articles of Incorporation, these Bylaws, state statutes, common law and otherwise, shall be exercised, performed, or controlled by the Board. The Board shall determine ACCJC’s policies or changes therein and supervise the management of funds. The Board may adopt, by majority vote, such rules and regulations for the conduct of its business and the business of ACCJC as shall be deemed advisable, and may in the execution of its duties, delegate its authority to an executive committee. Under no circumstances, however, shall any actions be taken which are inconsistent with the Articles of Incorporation and these Bylaws, and the fundamental and basic purposes of ACCJC, as expressed in the Articles of Incorporation and these Bylaws.

Section 3. Vacancies, Resignations, and Removals
A board position will become vacant when the director filling such position ceases to be a Commissioner, regardless of the reason. For procedures and processes relating to resignation, removal, or other reasons which will cause a position to become vacant on the Commission and on the Board, see Article III, Section 4, 5 and 6.

Section 4. Quorum
The majority of the Board (not counting any board positions that are vacant) shall constitute a quorum for the transaction of business, except in no instance may a quorum be less than one-fifth of the authorized number of directors. Every act or decision done or made by a majority of the directors present at a meeting held at which a quorum is present shall be regarded as the act of the Board, subject to the provisions of the Nonprofit Corporation’s Law (California Corporations Code, § 5000 et. seq.). A meeting at which a quorum is initially present may continue to transact business, notwithstanding the withdrawal of any director, if any action thereafter taken is approved by at least a majority of the quorum required for the meeting. A majority of the directors present, regardless of whether a quorum is present, may vote to adjourn a meeting.
Section 5. Action without a Meeting

Any action required or permitted to be taken by the Board may be taken without a meeting if all directors individually or collectively consent in writing to that action. Such action by written consent shall have the same force and effect as a unanimous vote of the Board. Such written consent or consents shall be filed with the minutes of the proceedings of the Board.

Section 6. Minutes

The Board shall maintain minutes of all of its meetings and proceedings. The meetings of the Board may take place concurrently with meetings of the Commission or separately, at the discretion of the Board, but the minutes of Board meetings shall be maintained separately.

Section 7. Agenda

The Board’s Chair, in consultation with the President, shall decide the Board’s agenda. The Board’s business shall include all matters which require Board action or review. When the Board meets to consider actions that concern the candidacy or accreditation of member institutions, the imposition of sanctions, or the review and approval of eligibility criteria, accreditation standards or institutional policies (“Accreditation Matters”), the Board shall do so as the Commission and shall act under Articles III and V of these Bylaws. Authority and responsibility over all Accreditation Matters resides exclusively with the Board when it is acting as the Commission. Examples of Board agenda items, when the Board is not acting as the Commission, include the review and acceptance of ACCJC’s annual audit, review and approval of any internal operational policies, review of ACCJC’s investments and reserves, receipt of reports from the Executive and other committees concerning matters that do not involve Accreditation Matters, review of ACCJC’s relationship with vendors, including its banking relations, review and approval of any leases for space or other significant contracts, approval of any loans or lines of credit, personnel issues that require board review, periodic evaluation of its President, review of ACCJC’s insurance policies, and such other matters, involving the policy or direction of ACCJC that are referred to it. Board meetings that do not involve Accreditation Matters will ordinarily be conducted in Executive Session.

ARTICLE VII
OFFICERS

Section 1. Officers

ACCJC shall maintain the following officers: a Chair, a Vice Chair, the President, a Secretary and a Chief Financial Officer. The positions of Chair, Vice Chair, and President shall be held by different persons. The Secretary and Chief Financial Officer positions may be held by the same person or by persons who hold other officer positions.

Section 2. Selection of Officers

The position of Chair is filled by the succession of the Vice Chair. The Vice Chair is elected by the Board and succeeds to the office of Chair when that office becomes vacant. He or she then serves a two-year term as Chair. No member of the Board may serve as its Chair for longer than three consecutive years. Thus, the Vice Chair may succeed to no more than twelve months of an unexpired term, followed by his or her two-year term. When a vacancy occurs in the Vice Chair position, an election to fill that office must occur within 45 days of the position becoming vacant.
Nominations for Vice Chair are normally solicited from the Directors before the winter meeting prior to the end of the Chair’s term. Nominees for the position shall represent a different membership category from that of the incoming Chair. Four weeks prior to the scheduled vote, each nominee must submit a 200-word statement explaining why he or she is seeking the office. The statement is distributed to the full Board prior to the vote. Voting is conducted through a secret ballot submitted to the ACCJC executive staff. The results are to be announced to the entire Board within one week.

Officers are expected to serve in several ex-officio capacities. The Chair serves as an ex-officio, voting member of the Budget and Personnel Committee and of the Policy Committee, and as Chair of the Executive Committee. The Commission chair also serves on the WASC Board. The Vice Chair serves as an ex-officio voting member of the Executive Committee, and the Committee on Substantive Change, and may serve as the Substantive Change Committee’s chair. The chair of the Budget and Personnel Committee serves as an ex-officio member of the Executive Committee.

The President, the Secretary, and the Chief Financial Officer shall be appointed by the Board and shall serve at the pleasure of the Board, subject to the rights, if any, under any contract of employment.

Section 3. Subordinate Officers
The Board may appoint, and may empower the President to appoint, such other officers as the business of the corporation may require, each of whom shall hold office for such period, have such authority, and perform such duties as are provided in these Bylaws or as the Board may from time to time determine.

Section 4. Removal and Resignation of Officers
Subject to the rights, if any, of an officer under any contract of employment, any officer may resign at any time by giving written notice to the President. Subject to the rights, if any, of an officer under any contract of employment, any officer may be removed, either with or without cause, by the Board, and, if appointed by the President, by the President.

Section 5. Vacancies in Office
A vacancy in any office because of death, resignation, removal, disqualification or any other cause shall be filled in the manner prescribed in these Bylaws for regular appointments to that office.

Section 6. President
The President shall be the Chief Executive Officer of ACCJC, and the general supervision, direction, and control of the operations of ACCJC, including its business and accreditation operations, shall reside with the President.

Section 7. Chair
The Chair of the Board shall preside at all meetings of the Board and of the Commission. The Chair of the Board shall also serve concurrently as Chair of the Commission. The Chair shall
exercise and perform such other powers and duties as may be from time to time assigned to him or her by the Board or by the Commission or as may be prescribed by these Bylaws. In the absence or disability of the President, the Chair shall also perform the duties of the President.

Section 8. Vice Chair
In the absence or disability of the Chair, the Vice Chair shall perform the duties of the Chair, and, when so acting shall have all the powers of the Chair. The Vice Chair shall have such other powers and perform such other duties as from time to time may be prescribed by the Chair or by these Bylaws.

Section 9. Secretary
The Secretary shall keep or cause to be kept, at the principal executive office or such other place as the President may direct, a book of the minutes of all meetings and actions of Board and the Commission with the time and place of holding, whether regular or special, and, if special, how authorized, the names of those present at such meetings, and actions taken.

The Secretary shall give, or cause to be given, notice of all meetings of the Board and the Commission and shall have such other powers and perform such other duties as may be prescribed by the Board, the President, or these Bylaws.

Section 10. Chief Financial Officer
The Chair of the Budget and Personnel Committee shall act as the Chief Financial Officer and shall be responsible for maintaining, or cause to be kept and maintained, adequate and correct books and records of accounts of the properties and business transactions of the ACCJC, including accounts of its assets, liabilities, receipts, disbursements, gains, and losses. The books of account shall at all reasonable times be open to inspection by the President and any member of the Board.

The Chief Financial Officer shall report to the President and the Board, at such times as they shall direct, an account of all of the financial condition of ACCJC, and the Chief Financial Officer shall have other powers and perform such other duties as may be prescribed by the President or the Board or by these Bylaws.

ARTICLE VIII
COMMITTEES

The Executive Committee shall be comprised of the Chair, the Vice Chair, and the Chair of the Budget and Personnel Committee. For purposes of continuity of leadership, an individual who has completed a two-year period as Chair and who remains on the Commission to complete a term will also serve on the Executive Committee. The Executive Committee shall serve as council to the President between Board and Commission meetings and is authorized to act for the Board and the Commission between meetings on all matters that would appropriately come before the Board or the Commission and where action prior to the next Board or Commission meeting is necessary. All actions taken by the Executive Committee shall be reported to the Board or to the Commission, as appropriate, at its next meeting.
The Board and Commission shall be served by such standing and ad hoc committees as they create. Ad hoc committees, to serve the Board or Commission, may be created at the discretion of the Chair, but their creation, functions, and authority must be ratified by a simple majority of the Board or Commission at the first Board or Commission meeting following the creation of the ad hoc committee.

Standing committees shall be authorized by a simple majority of the Board or Commission and may be dissolved by the same margin of the Board or Commission. The Commission may charge a standing committee with authority to act on its behalf, to the extent permitted by law. In such case, the standing committee of Commissioners must comprise academic representatives and administrative representatives, and at least one seventh of the committee membership must comprise representatives of the public. No Standing Committee membership may be comprised of a majority of the Board or Commission. Members and chairs of standing committees are appointed by the Chair and serve two-year terms. Current standing committees of the Commission are the Audit Committee, the Budget and Personnel Committee, the Committee on Substantive Change, the Policy Committee, and the Evaluation and Planning Committee. The Commissioner Nominating Committee is constituted at regular intervals as described in Article IV, above.

ARTICLE IX
APPEALS

Section 1. Right to Appeal
If an institution, after availing itself of the Commission’s Review process, described in the Commission’s Policy “Review of Commission Actions,” is the recipient of a Commission action that sustains a denial or termination of candidacy or accreditation, the institution shall have the right to appeal that decision. In order to perfect the appeal, the institution, acting through formal authorization to its chair from the institution’s governing board, must deliver a notice of appeal to the President within 30 calendar days of receiving notice of the Commission’s action on review to affirm an adverse action on the institution, in the form described in the ACCJC Appeal Procedures Manual (described in Section 3 below). During the period up to and including the pendency of the appeal, the institution's status with the Commission shall remain the same as it was prior to the decision being appealed.

Section 2. Hearing Panel
Upon receipt of a properly completed and delivered notice of appeal, the Executive Committee shall appoint a Hearing Panel consisting of not less than five (5) nor more than seven (7) qualified persons. The Executive Committee shall also appoint the chair of the Hearing Panel. The Hearing Panel members may not be current Commission members and may not have participated, whether through Review Committee participation or through prior team participation, in the decision being appealed. At least one member of the Hearing Panel shall be a representative of the public. A representative of the public is someone who is not: an employee, member of the governing board, owner, shareholder, or consultant to an institution that has applied for or is in candidacy or is accredited by the ACCJC; a member of any trade association or membership organization related to, affiliated with, or associated with the agency; or a spouse, parent, child, or sibling of such individuals. The Hearing Panel shall also include an administrative representative with post-secondary administrative experience, and an academic representative with post-secondary faculty experience.
Each member selected must sign the Commission’s “Appellate Conflict of Interest Policy,” acknowledging that they do not have conflict of interest. The institution shall have the ability to challenge the selection of any Hearing Panel member for cause according to the procedures in the ACCJC Appeal Procedures Manual. Each member, including the Chair, shall have one vote. Any replacement Hearing Panel members shall be selected in the same manner.

Section 3. Appeal Procedures Manual and Appellate Conflict of Interest Statement
The Commission has adopted an appeals manual, referred to herein as the “ACCJC Appeals Procedures Manual.” The ACCJC Appeals Procedures Manual sets forth more fully the procedures for conducting the appeal. A copy of the ACCJC Appeals Procedures Manual will be provided to the institution when the institution receives notice of an appealable Commission action. The Commission has adopted an “Appellate Conflict of Interest Policy” which members of the Hearing Panel must sign before they may be seated to hear an appeal.

Section 4. Costs
An institution bringing an appeal shall file a deposit to cover one half of those out of pocket costs of the Commission, as set forth more fully in the ACCJC Appeals Procedures Manual. The Commission will establish the amount of the deposit and may modify it from time to time at its discretion. In the event the actual costs exceed the amount of the deposit, the institution shall be responsible for the balance and may be required, during the appeal, to supplement the deposit. In the event the deposit exceeds the necessary costs, the institution shall receive a refund of the difference at the conclusion of the appeal. In the event the institution prevails in the appeal, the Hearing Panel shall have the discretion to refund the institution’s deposit at the conclusion of the appeal.

Section 5. New Financial Evidence
On one occasion only and not later than thirty (30) days prior to the date the appeal is scheduled to commence and only in the event the institution’s deficiencies, following the Review, only relate to the institution’s finances, the institution may request a special review by filing a written request for such review with the President and identifying that information which, in the opinion of the institution’s chief executive officer, constitutes New Financial Evidence. Such request shall be co-signed by the chair of the institution’s governing board. New Financial Evidence is evidence that (1) was unavailable to the institution until after the date upon which the Commission’s policies permitted the institution to submit evidence that was considered in connection with the action being appealed (and is therefore timely), and (2) bears materially on the financial deficiencies identified by the Commission. Evidence shall be deemed to bear materially on the financial deficiencies identified by the Commission. Evidence shall be deemed to bear materially on the financial deficiencies only if such evidence is of sufficient gravity that, if proven, would be likely to cause the Commission to reverse the decision being appealed.

Upon receipt of the New Financial Evidence, the Commission’s Chair shall form an ad hoc committee of no fewer than three (3) Commissioners (the New Financial Evidence Committee) to review the New Financial Evidence. The membership of the New Financial Evidence Committee may include Commissioners who have acted as readers or for other reasons are familiar with the issues affecting the institution, but may not consist of any Commissioners who have a conflict of interest with respect to the institution as defined by the Commission’s Bylaws of the Accrediting Commission for Community and Junior Colleges
Conflict of Interest Policy. The New Financial Evidence Committee shall conclude prior to the date the appeal hearing is scheduled to commence. The decision of the New Financial Evidence Committee shall be communicated in writing to the institution and to the President. The decision of the New Financial Evidence Committee shall not be subject to any further review or appeal, except as herein provided. If, in the sole judgment and discretion of the New Financial Evidence Committee, acting by majority vote, the New Financial Evidence is found not to have been raised in a timely manner or is found not to bear materially on the financial deficiencies of the institution, the appeal hearing shall continue without interruption, and the New Financial Evidence shall not become part of the record on appeal.

If, in the sole judgment and discretion of the New Financial Evidence Committee, the New Financial Evidence is found to have been raised in a timely manner and to bear materially on institution’s financial deficiencies, the President shall immediately postpone the hearing until after the date of the next Commission meeting at which time the Commission will reconsider the decision being appealed. The Commission shall independently review the New Financial Evidence and make its own determination regarding whether such evidence was timely and material. If, in the sole discretion of the Commission, the New Financial Evidence is found to have been raised in a timely manner and to bear materially on the institution’s financial deficiencies, the Commission shall render a new decision which shall act to remove the previous sanction. It may, in its sole discretion, impose any other lesser sanction and conditions which it deems appropriate, and the institution shall not be able to seek further appeal or review from such lesser sanction, if any is imposed. In such instance, the Commission shall instruct the President to dismiss the appeal.

If, in the sole discretion of the Commission, the New Financial Evidence is not found to have been raised in a timely manner or if it is found not to bear materially and significantly on the financial deficiencies which served as the basis of the decision that is being appealed, the Commission shall instruct the President to take the necessary steps to resume the appeal hearing. In all events, the decision of the Commission shall include findings on the timeliness and materiality of the New Financial Evidence. Such decision shall not be subject to consideration by the Hearing Panel. Such decision in all instances shall be communicated in writing to the institution, to the President, and to the Hearing Panel’s Chair.

Section 6. The Appellate Hearing
The President shall arrange the appellate hearing at the earliest practicable date. Those testifying shall not be placed under oath. The Commission will ordinarily have legal counsel present, and the institution has a right, but is not required, to have legal counsel present.

At least sixty (60) calendar days before the time set for the appellate hearing of such an appeal, the President shall cause notice of the time and place of the appellate hearing to be delivered, by a means that will assure a written receipt, to the Chair of the governing board of the institution with a copy to its chief executive officer.

Section 7. Grounds for Appeal
The grounds for appeal shall be limited to the following: (1) there were errors or omissions in carrying out prescribed procedures on the part of the evaluation team and/or the Commission which materially affected the Commission’s action; (2) there was demonstrable bias or prejudice on the part of one or more members of the evaluation team or the Commission.
which materially affected the Commission’s action; (3) the evidence before the Commission prior to and on the date when it made the action which is being appealed was materially in error; or (4) the action of the Commission was not supported by substantial evidence. The “action” referred to in this Section refers to the Commission’s action at the conclusion of the Commission’s Review process.

Section 8. Decision of the Hearing Panel

The Hearing Panel shall make its decision by a vote of the majority on the basis of the admissible evidence and arguments presented to it at the hearing. The Hearing Panel’s decision may include a determination as to whether the grounds for appeal were established. The Hearing Panel may act to dismiss the appeal for lack of grounds, affirm in whole, affirm in part and amend, reverse, or remand the action being appealed and the reasons that were cited in its support. The Hearing Panel shall issue its decision and the reasons therefore in writing within thirty (30) calendar days and will inform the ACCJC President, the chair of the governing board of the institution and the chief executive officer of the institution of such decision. Such decision shall not be subject to any further appeal.

1. If the Hearing Panel finds in favor of the institution on one or more of grounds (1) through (4) of Section 7 above, the Hearing Panel’s decision will have the effect of reversing the denial or termination of the candidacy or accreditation of the institution. Its decision may recommend, but shall not dictate, any terms or conditions to be imposed on the accreditation or candidacy of the institution by the Commission when it implements the Hearing Panel’s decision. The Commission shall thereafter implement the Hearing Panel’s decision and, in doing so, shall retain the discretion to impose conditions, including a sanction which is less than the denial or termination of candidacy or accreditation on the candidacy or accreditation of the institution. The Commission’s implementation action shall be consistent with the Hearing Panel’s decision. Such implementation action by the Commission will be communicated to the institution and shall not be subject to further review or appeal.

2. If the Hearing Panel finds against the institution on any of the four grounds in Section 7 above, it shall deny that portion of the appeal which is based on that ground. If the Hearing Panel finds against the institution on all grounds appealed, its decision shall act to affirm the action of the Commission which was appealed. The decision under this subsection (2) shall not be subject to any further review or appeal.

3. If the Hearing Panel finds that there are issues which deserve further consideration by the Commission, the Hearing Panel shall remand the Commission’s action to the Commission. Such remand decision shall identify the issues that must be addressed further by the Commission and shall include any instructions which the Hearing Panel believes are necessary in order to assure that the Commission’s final action will be consistent with the Hearing Panel’s decision. The Commission shall thereupon consider such issues and arrive at a final action which shall be consistent with the Hearing Panel’s decision and instructions. The action by the Commission following such remand shall be final and shall not be subject to further review or appeal.
Section 9. Institutional Financial Obligations Following Litigation

Any institution which takes legal action against the ACCJC regarding an accreditation decision and withdraws or loses its case is responsible for assuming all costs incurred by the ACCJC while defending its position, including attorney fees. These costs must be paid in full within 45 days following the institution’s receipt of the ACCJC invoice, unless other arrangements are approved by the Executive Committee acting on behalf of the ACCJC Board of Directors.

ARTICLE X
STANDING RULES

Robert’s Rules of Order shall govern all meetings of the Board, the Commission and committees, except in the case where ACCJC has adopted standing rules. All standing rules of the ACCJC shall take precedence over Robert’s Rules of Order.

ARTICLE XI
INDEMNIFICATION

The Accrediting Commission for Community and Junior Colleges (ACCJC) does hereby grant indemnification to any officer, director, commissioner, or other agent, or former officer, director, commissioner, or other agent, including but not limited to the ACCJC’s employees and team members, for claims or actions asserted against said person arising out of acts or omissions alleged to have occurred in connections with, or as a result of his or her activities as an officer, director, commissioner, employee, or agent, of the ACCJC, to the fullest extent permitted by law; provided however, as follows:

a. If any claim or action is asserted or threatened to be asserted, as described in such statutes, the person requesting indemnification must give timely notice thereof to the President of the ACCJC; and

b. The ACCJC must approve of the law firm that will defend that person in such claim or action.

Indemnification shall be provided herein only to the extent that valid and collectible insurance coverage under all existing policies of insurance held by the ACCJC has been exhausted.

ARTICLE XII
AMENDMENTS

These bylaws may be amended by a simple majority vote of the Board after the proposed amendments have been circulated among the Board members at least two weeks before the meeting at which the vote is taken. In those instances where time is of the essence, the Board may employ telephone, mail, or electronic ballot processes. Notwithstanding the foregoing, any amendment that would terminate all or any class of memberships shall not go into effect until the members have approved amendment in accordance with the procedures contained in Section 5342 of the Corporations Code, or its any successor statute.
Policy on Access to Commission Meetings

(Adopted June 1978; Revised January 2000; Edited June 2005; Revised January 2006; Edited August 2012, April 2013; Revised October 2013, January 2014)

The Commission holds its meeting for two purposes: to decide the accredited status of applicant and member institutions and to consider such informational and policy matters as may come before it. The Commission meets in Public Session when deliberating or acting upon informational or policy matters. When deliberating or acting upon matters that concern specific individuals or the accredited status of institutions, the Commission meets in Closed Session to ensure the confidentiality of those matters, that decisions are based on facts presented in accordance with accreditation procedures, and to ensure decisions are not improperly influenced.

The Commission holds public sessions to share information with the field and to provide transparency to the public. The Commission supports and encourages the presence of members of the public at its Public Sessions. Seating, though limited, is made available for members of the public at each meeting.

Public Sessions of the Commission Meeting

The President sends a preliminary agenda of the public session approximately 45 days before each regular meeting of the Commission to the Chief Executive Officer and Accreditation Liaison Officer of all applicant, candidate, and accredited institutions with the request that the agenda be posted or otherwise publicized. The public session agenda is also posted on the Commission web page in advance of the meeting.

Observers will be seated at the public sessions of Commission meetings as space allows. Anyone wishing to make a presentation or address the Commission must give advance notice to the President as outlined below and identify the agenda item that they wish to address. No reference to specific individuals or institutions shall be made in Public Session.

Participation by observers at Commission meetings is limited to the following:

A. Statements which address the Commission’s agenda and which have been noted by the President in the agenda at the appropriate places. A written copy of all prepared remarks should be given to the President prior to the presentation. Requests to make statements should be made to the President, in writing, not less than 15 days before the Commission meeting.

B. Requests to bring items to the attention of the Commission. Such requests should be made to the President, in writing, not less than 15 days before the Commission meeting.

C. Brief comments on specific points in the Public Session agenda. These may be made at the end of the Commission discussion of the same topic upon recognition from the Chair. The Chair may invite participation at other times at his/her discretion.
D. **Public comment period.** Public Session agendas will include a fifteen minute period for public comment, generally at the beginning of the meeting. Individuals wishing to make public comment will be asked to register and to cite the subject of their comments.

In all cases, observers’ statements shall be limited to five minutes but may be extended at the discretion of the Chair or vote of the Commission.

**Closed Sessions of the Commission**

A. When the Commission is deliberating or acting upon matters that concern an institution, it will invite the Chief Executive Officer of the institution to meet with the Commission in Closed Session. There is no requirement that the Chief Executive Officer attend the Commission meeting. If the Commission is considering institutional action as a result of an evaluation team visit and the Chief Executive Officer of the institution accepts the invitation to attend, the Chair of the evaluation team or designee is also invited to attend.

The institutional representative will be invited to make a brief presentation followed by questions by Commissioners. The amount of time for presentations will generally be limited to five minutes per institution. The Commission reserves the right to establish a different time limit on and procedures for such presentations. If the institution wants to bring written material to the Commission’s attention it must be submitted to the Commission no less than 15 days before the meeting. No additional materials will be accepted by the Commission after that time, including at the meeting during the presentation of oral comments. After the institutional representative is excused the evaluation Team Chair will be asked to respond to Commission questions. The Team Chair is then excused, and the Commission deliberations and decision are conducted in Closed Session.

B. When the Commission is deliberating or acting upon matters that concern specific individuals, the Commission meets in Closed Session. Requests to meet with members of the Commission about matters that concern specific individuals should be made to the President, in writing, not less than 15 days before the Commission meeting. Whenever possible, the President will arrange for a subcommittee of Commissioners to meet with the individuals preceding the Closed Session of the Commission to discuss the matters of concern. These Commissioners will report to the Commission as a whole and may recommend a presentation before the full Commission at an appropriate time.
Policy on Appellate Conflict of Interest and Statement
(Archived January 2013)

Policy
It is the policy of The Accrediting Commission for Community and Junior Colleges, Western Association of Schools and Colleges ("the Commission") that all persons who serve on a Hearing Panel in connection with an appeal from an action by the Commission to deny or terminate the candidacy or accreditation of an institution be free from any conflict of interest. Accordingly, all such persons will be required to sign the Conflict of Interest Statement, in the form set forth below:

Conflict of Interest Statement

I, __________________ [print name], have been asked to serve on a Hearing Panel for the Commission. I understand that my duties will include reviewing an action of the Commission which resulted in the denial or termination of the candidacy or accreditation of an educational institution. In connection with this task, I have been apprised of the identity of the educational institution, and I declare that I have no conflict of interest which I am aware that relates to this institution. I understand that this means that neither I nor any member of my immediate family has any financial relationship with this institution, whether by employment or otherwise, and no other relationship with the institution which would impede, in my judgment, my objectivity in deciding the issues before the appeal. It further means that I do not currently serve on the Commission and have not served on any team, review committee, or any other body, on behalf of the Commission, which was involved the action of the Commission which is being appealed.

I hereby execute this Conflict of Interest Statement under penalty of perjury, on the date and in the county and state, indicated below.

____________________________      ______________      _______________________
Signature  Date County and State
Policy on Conflict of Interest for Commissioners, Evaluation Team Members, Consultants, Administrative Staff, and Other Commission Representatives


Purpose

The Commission seeks to assure that those who engage in accreditation activities make every effort to protect the integrity of accrediting processes and outcomes. The intent of the Commission is to:

- maintain the credibility of the accreditation process and confidence in its decisions;
- assure that decisions are made with fairness and impartiality;
- assure that allegations of undue influence; relationships which might bias deliberations, decisions, or actions; and situations which could inhibit an individual’s capacity to make objective decisions are minimized;
- make all of its decisions in an atmosphere which avoids even the appearance of conflict of interest; and
- provide the means to disclose any existing or apparent conflict of interest.

Policy

A conflict of interest is any circumstance in which an individual’s capacity to make an impartial and unbiased decision may be affected because of a prior, current, or anticipated institutional/district/system affiliation or other significant relationship(s) with an accredited institution/district/system or with an institution seeking initial accreditation, candidacy, or reaffirmation of accreditation.

The Commission seeks to assure that its decisions on institutions and on all other matters before the Commission are based solely on professional judgment and an objective application of its Eligibility Requirements, Accreditation Standards, and Commission policies. Accordingly, the Commission takes all necessary measures to assure that conflicts of interest and the appearance of conflicts of interest on the part of Commissioners, evaluation team members, consultants, administrative staff, or other agency representatives are avoided.

The Commission expects that all individuals associated with the Commission, whether as Commissioners, evaluation team members, consultants, administrative staff or other agency representatives, will display personal and professional integrity and guard against conflicts of interest, or the appearance of conflicts of interest, by adhering to this Policy and by refusing any assignment where the potential for conflict of interest exists.
Policy Elements

Each Commissioner, evaluation team member, consultant, member of the Commission administrative staff, and other agency representative is asked to review this Policy and consider potential conflicts of interest in his/her proposed assignments.

The following interactions with an institution/district/system have been determined to be of the type that constitute a conflict of interest or the appearance thereof, normally within the last five years:

a. current or prior employment at the institution/district/system being evaluated;
b. candidacy for employment at the institution/district/system being evaluated;
c. current or prior service as a paid consultant or other business relationship with the institution/district/system being evaluated;
d. a written agreement with an institution/district/system that may create a conflict or the appearance of a conflict of interest with the institution/district/system;
e. personal or financial interest in the ownership or operation of the institution/district/system;
f. close personal or familial relationships with a member of the institution/district/system;
g. other personal or professional connections that would create either a conflict or the appearance of a conflict of interest; or
h. receipt of any remuneration, honoraria, honorary degrees, honors or other awards from the institution/district/system.

Notwithstanding the definition of a conflict of interest provided in this policy and in the above list of types of conflicts or potential conflicts of interest, a conflict of interest arising from one of these types of relationships does not go into perpetuity, but normally expires five years after the relationship ends. Nevertheless, the individual is expected to ask him/herself whether the existence of such relationship would in any way interfere with his/her objectivity, and, if the answer is in the affirmative, he/she is expected to refuse the assignment or recuse him/herself from the deliberations related to the issue that caused the conflict of interest.

The following interactions with an institution/district/system have been determined to be of the type that do not constitute a conflict of interest or the appearance thereof:

a. attending meetings or cultural events on a campus;
b. having infrequent social contact with members of institutions/districts/systems;
c. making a presentation at an institution on a one-time, unpaid basis, with no sustained relationship with the institution; or

d. fulfilling a professional assignment with members of an institution on an issue not related to the institution’s accreditation.
Avoiding the Appearance of Conflict of Interest

To achieve the purposes of this policy, it is expected that Commission representatives will make every effort to avoid the appearance of conflict of interest, in both formal and informal interactions with members of the field and with the public. Commissioners and committee members should adhere to the Policy on Professional and Ethical Responsibilities of Commission Members when presented with inquiries or opportunities for public comment on member institutions, ACCJC business or accreditation practices.

Evaluation Team Members

The Commission will not knowingly invite or assign participation in the evaluation of an institution to anyone who has a conflict of interest or the appearance thereof. Team members are required to confirm in writing that they have reviewed this Policy when they are invited to serve on a team. In order to avoid an appearance of conflict to the public, immediate family members of Commissioners and Commission staff will not be invited or assigned to participate on an evaluation team.

Institutions being evaluated should review the prospective evaluation team members for potential conflict of interest. The Commission President should be notified immediately if there are conflicts of interest or any concerns that there might be conflicts of interest.

During the period in which the visit is occurring and Commission action is pending, evaluation team chairs and team members are expected to refrain from any of the above listed situations of potential conflicts of interest with an institution for which they have been an evaluation team member.

Commissioners

A Commissioner is expected to recuse him/herself from any deliberation or vote on decisions regarding individual institutions where any of the conflicts of interest listed above exist. A Commissioner who served on the most recent evaluation team of an institution being considered must recuse him/herself. Any such potential conflict of interest shall be reported to the Commission in advance of the deliberation and action and shall be recorded in the Commission minutes.

A Commissioner who is uncertain regarding a possible conflict of interest may recuse him/herself, or abstain from voting on decisions regarding the institution, in which case there is no requirement to disclose the nature of the contact(s) for review by the Commission. Alternatively, the Commissioner may disclose the nature of the potential conflict of interest for review by the Commission. The Commission shall then determine in all such cases by majority vote whether the situation raises a conflict of interest or the appearance of conflict of interest. If the Commission determines that the situation raises a conflict, the affected Commissioner will be recused from the deliberations of the case that caused the conflict.

In the case where a Commissioner or the Commission President believes that a Commissioner may have a conflict of interest or the appearance of conflict of interest that the Commissioner has not acted upon, that other Commissioner or the Commission President should bring the conflict of interest or the appearance of conflict of interest to the attention of the Commissioner and give him/her an opportunity to recuse him/herself from the deliberations of the case that caused the conflict. If the matter is not resolved, the other
Commissioner or the Commission President may bring the matter to the attention of the full Commission, which will then consider the matter and determine by majority vote on whether the situation raises a conflict of interest or the appearance of conflict of interest. If the Commission determines that the situation raises a conflict, the affected Commissioner will be recused from the deliberations of the case that caused the conflict.

Commission decisions regarding any issue raised relating to conflict of interest shall be noted in the minutes.

At no time during their appointment as Commissioners, should Commissioners consult with institutions on matters of accreditation for compensation.

Commission Staff and Consultants
During the period of Commission employment, Commission staff members, including consultants, are expected to refrain from connections and relationships with candidate or member institutions which could represent a conflict of interest. In the case where a Commissioner or another Commission staff believes that a Commission staff member may have a conflict of interest or the appearance of conflict of interest that the staff member has not acted upon, that Commissioner or the other Commission staff should bring the conflict of interest or the appearance of conflict of interest to the attention of the Commission President. The Commission President will determine whether the situation raises a conflict of interest or the appearance of conflict of interest. If the Commission President determines that the situation raises a conflict, Commission staff will be removed from the assignment that caused the conflict.

Commission staff may not engage in private consulting or employment with, nor accept honoraria, or honorary degrees from member institutions. Commission staff may engage in such arrangements with outside organizations or institutions other than member institutions only with the approval of the Commission President. The Commission President may engage in such arrangements only with the approval of the Commission Chair.

Suspension or Removal
When a conflict or apparent conflict of interest arises, the Commission President or Commission by majority vote may direct that the involved role or behavior of the affected individual (Commissioner, evaluation team member, consultant, administrative staff member, commission representative) shall cease immediately. When a conflict cannot be resolved by recusal or immediately ending the affected individual’s role or behavior that created the conflict or perception of conflict, then:

a. the Commission President, in case of an Evaluation Team Member, Consultant, Administrative Staff Member or other Commission Representative, may elect to suspend or remove the affected individual or take such other action as is deemed appropriate;

b. or the Commission by majority vote, in the case of a Commissioner, may elect to suspend or remove the affected individual or take such other action as is deemed appropriate.
Policy on Insider Trading
(Adopted June 2011)

Background
Federal laws prohibit persons with so-called “insider” information about a for-profit company from trading in the stock of that company. These prohibitions are generally known as the SEC insider trading rules. The Accrediting Commission of Community and Junior Colleges (“ACCJC”) has determined, on advice of legal counsel, that the insider trading rules, under certain circumstances, may have applicability to persons associated with the Commission, who gain access to confidential information about for-profit educational institutions and their related systems. This policy has been developed in order to minimize the legal risk that is thereby created.

Policy
No person who is serving as a member of the Commission, as a volunteer or paid member of a committee or visiting team, or as a staff member of the Commission may buy or sell (trade in) the stock (or other form of security) of any member institution (as defined) while that person is serving in one of the capacities described in a., b., c., or d. below, unless one of the Exceptions to this Policy, explained below, applies. For purposes of this Policy, an “ACCJC Institution” is any for-profit educational institution that is either an applicant for candidacy or accreditation before the Commission, an institution that enjoys candidate or accredited status with the Commission, or any entity affiliated with such educational institution, such as a parent holding company. The period of time in which this policy prohibits the trading of stock is referred to as the “Trading Freeze.”

Specific Situations
a. Committee membership: With respect to a member of a standing or special committee, the Trading Freeze shall only apply when that person’s committee duties involve reviewing an ACCJC Institution and thereafter until the Commission publicly announces the action on this ACCJC Institution which relates to the committee’s report.

b. Team membership: With respect to a member of a visiting team, the Trading Freeze shall apply only if the team member has been assigned to review an ACCJC Institution. The Trading Freeze shall begin at the time of the team member’s assignment to the team and last until the Commission publicly announces its action on the ACCJC Institution which relates to the team’s report.

c. Commission membership: With respect to Commission members, the Trading Freeze shall apply to those Commission members who are involved in a Commission action involving an ACCJC Institution. Except in instances where the entire Commission is taking action on an ACCJC Institution, the Trading Freeze will only affect readers and members of the Commission panel assigned to review the ACCJC Institution.
Such trading freeze will begin at such time as the affected Commission member receives non-public information about the ACCJC Institution and will end two weeks after the Commission makes public the action taken on the ACCJC Institution.

d. Commission Staff: With respect to Commission Staff, the Trading Freeze shall apply to all staff members who have access to any non-public information concerning ACCJC Institutions, and the Trading Freeze shall apply during the entire employment of all such Commission staff members.

Exceptions

a. The above Policy shall not apply to any person who certifies in a Conflict of Interest Disclosure Statement to the Commission that:
   (i) he or she received stock in a particular ACCJC Institution by virtue of his or her employment with that ACCJC Institution; and
   (ii) he or she is aware of and will abide by rules established by that ACCJC Institution designed to protect against violations of SEC trading rules.

b. The above Policy shall not apply if the investment is in a mutual fund that includes the stock of an ACCJC Institution as one of its holdings.

c. The above Policy shall not restrict any person from owning and holding stock in any ACCJC Institution if that person does not trade (i.e., buy or sell) that stock, or exercise any options or puts for that stock, at any time during that person’s service for the Commission.
Each institution must be free to decide for itself whether or not to seek accreditation by any particular agency. If an institution desires both regional institutional accreditation and specialized program accreditation, the ACCJC may, at its discretion, collaborate with the specialized accrediting agency in arranging joint visitations or exchange of information.

A specialized institution may apply for regional accreditation through ACCJC if it meets the Commission’s Eligibility Requirements. The institution should note that included in the Eligibility Requirements is the expectation that the institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and promote intellectual inquiry. The general education component must include demonstrated competence in writing and computational skills and an introduction to some of the major areas of knowledge. General education must have comprehensive learning outcomes for the students who complete it. Degree credit for general education programs must be consistent with levels of quality and rigor appropriate to higher education.
ACCREDITING COMMISSION FOR COMMUNITY AND JUNIOR COLLEGES
Western Association of Schools and Colleges

Policy on Professional and Ethical Responsibilities of Commission Members

Purposes of the Commission Accreditation
ACCJC Commissioners are expected to accept and subscribe to the defined purposes of accreditation, and to support and uphold the ACCJC’s purposes, Eligibility Requirements, Accreditation Standards, Commission policies, and processes.

The purposes of accreditation shall be the evaluation of member institutions to assure the educational community, the general public, and other organizations and agencies that an institution has clearly defined objectives appropriate to higher education; has established conditions under which their achievement can reasonably be expected; appears in fact to be accomplishing them substantially; is so organized, staffed, and supported that it can be expected to continue to do so; and demonstrates that it meets Commission standards. The Commission encourages and supports institutional development and improvement through self evaluation and periodic evaluation by qualified peer professionals.

Commission Responsibilities
The Commission as a whole:

- Establishes and periodically reviews Eligibility Requirements, Accreditation Standards, policies, and practices for member institutions;
- Serves as the primary decision-maker on accredited status of member institutions;
- Evaluates institutions in terms of their own stated purposes;
- Strives for consistency in determining accredited status of institutions;
- Assists in explaining broad purposes of accreditation and its intended impact on educational quality to the public served by the Commission.

Professional Responsibilities of Commission Members
A Commissioner:

- Participates in all Commission meetings and attends them for their entire duration;
- Studies documents as assigned prior to the meetings;
- Serves as an in-depth reader of evaluation visit materials as assigned;
- Votes according to his or her best professional judgment in accordance with existing policy and standards;

1 ACCJC Bylaws
- Participates on Commission committees and in activities representing the Commission’s interests as assigned;
- Attends and actively participates in Commission activities such as evaluation team visits and workshops;
- Participates in self evaluation and evaluation of the Commission;
- Participates in Commission planning efforts;
- Ensures that all functions of the Commission are executed responsibly through the Commission President;
- Refers all inquiries or requests for information concerning ACCJC business, member institutions, and accreditation practices to the Commission President or Commission Chair who serve as the official spokespersons for the ACCJC;
- Speaks on behalf of the Commission only when designated to do so by the Commission President or Commission Chair;
- Participates in the evaluation of the Commission President;
- Notifies the Commission Chair or Commission President in a timely manner if the Commissioner’s position or status changes during a term so that the Commissioner no longer meets the requirement for the category to which appointed.

**Ethical Responsibilities of Commission Members**

A Commissioner:

- Respects the confidentiality of relationships between the Commission and the institutions it accredits.
- Avoids conflicts of interest and the appearance of conflicts of interest, and subscribes to the Policy on Conflict of Interest for Commissioners, Evaluation Team Members, Consultants, Administrative Staff, and Other Commission Representatives.
- Is familiar with and adheres to established Commission bylaws and policies.
- Notifies the Commission President or Commission Chair if s/he is unable to perform the duties and carry out the responsibilities of a Commissioner.

**Responsibilities of Commissioner Confidentiality in Reviewing Institutions**

In reviewing institutions, a Commissioner will:

- Treat all institution-related documents as confidential unless they are explicitly identified to the contrary in writing, and refrain from discussing all such documents and related information except within their role as Commissioners with those who have a need for such information in the course of reviewing an institution.
- Protect all confidential documents provided to Commissioners in the course of ACCJC business, and refrain from discussing all such documents and related information except within their role as Commissioners and with those who have a need for such information in the courses of conducting Commission business.
• Take reasonable measures to assure the confidentiality of all documents in their possession by retaining those documents only on private electronic devices such as computers or ipads, or in private paper files.

• Return to the ACCJC or dispose of all documents, paper and electronic, when it is no longer necessary to retain them and when they are no longer needed for the matter under consideration by destroying them, either by shredding them or permanently deleting them from all electronic files and devices.

• Adhere to the ACCJC “Statement On the Process for Preserving Confidentiality of Documents Related to Institutional Evaluations.”
Policy on Relations with Accrediting Agencies


It is the policy of the Accrediting Commission for Community and Junior Colleges to maintain a working relationship with other accrediting agencies where a community of interest exists. Elements of the relationship shall include, but not be limited to:

- Active participation in meetings of executive staff and Commission leadership
- Routine open sharing of publications and policy documents
- Timely submission of information on accrediting decisions taken at Commission meetings
- Cooperating in the evaluation of institutions that operate in more than one accrediting association region
- Recommending persons for evaluation team and Commission service, and receiving such recommendations from other agencies
- Participation in common ventures of policy development and advocacy for institutional accreditation
- Systematically monitoring the status of ACCJC/WASC institutions with other accrediting agencies
- Consideration of actions taken by other recognized agencies when undertaking actions of initial candidacy or accreditation, or renewal of candidacy or accreditation of institutions that may be accredited by those other agencies
- Handling and forwarding of dues collected from member institutions on behalf of national affiliates such as the Council for Higher Education Accreditation

The Commission maintains regular communication with relevant accrediting agencies. On request from a relevant accrediting agency, information about the accreditation or preaccreditation status of an institution or about adverse actions on an institution will be provided.

Within 30 days of the Commission’s meeting, the Commission notifies the appropriate accrediting bodies of all institutional actions. If the Commission’s final decision is to deny, withdraw, suspend, or terminate the accreditation or preaccreditation of an institution or to put an institution on probation or show cause, the written notification will be provided at the same time as the institution is notified. Notification is also provided when a teach-out plan is approved by the Commission for a program that is accredited by another accreditor, whether resulting from withdrawal, adverse action, or loss state authorization or licensure.

The Commission notifies the relevant accrediting agencies if an accredited or preaccredited institution decides to withdraw voluntarily from accreditation or preaccreditation, or if the institution lets its accreditation or preaccreditation lapse. The Commission will notify the relevant accrediting agencies within 30 days of receiving notification from the institution of
the date that it is withdrawing voluntarily or of the date on which accreditation or preaccreditation lapses.

Upon receipt of information regarding interim or final adverse actions against a member institution by another recognized accrediting agency (or state agency), Commission staff will seek further information from the agency involved, and the Commission shall determine whether a review of the accredited status of the institution will be required.

The Commission will not renew the accreditation or preaccreditation of any institution during a period that the institution is the subject of an action by a recognized institutional accreditation agency potentially leading to the suspension, revocation, or termination of the institution’s accreditation or preaccreditation, or the institution has been notified of a threatened loss of accreditation and the due process procedures required by the action have not been completed. 34 C.F.R. § 602.28(b). If the Commission grants accreditation or preaccreditation notwithstanding these actions, the Commission will provide to the U.S. Secretary a thorough explanation consistent with its accreditation standards, why the previous action does not preclude the agency’s grant of accreditation or preaccreditation. 34 C.F.R. § 602.28(c).

In the event that the Commission grants initial accreditation, reaffirmation, or candidacy to an institution that is subject to adverse action by another recognized institutional accrediting agency, the bases for the decision will be explained and communicated to that agency and to the Secretary of Education as appropriate to each case.

The Commission is affiliated with other regional agencies through the Council for Higher Education Accreditation (CHEA). It should be noted that the Commission has been an active participant in the community of accrediting agencies since the establishment of the Western Association of Schools and Colleges, first with the Federation of Regional Accrediting Commissions in Higher Education (FRACHE), then the Council on Postsecondary Accreditation (COPA) and the Commission on Recognition in Higher Education Accreditation (CORPA) and the National Policy Board on Higher Education Accreditation.

The primary community of interest is clearly with the other regional institutional accrediting agencies. The Commission shares significant concerns with national agencies that accredit institutions, and to a lesser extent, with specialized accreditors. (Note policy, “Relationship Between General and Specialized Agencies.”)
Policy on Relations with Government Agencies

The Commission has sought recognition and periodically seeks renewal of recognition by the U.S. Secretary of Education, in order that member institutions achieve and maintain eligibility to participate in programs such as Title IV student financial aid of the Higher Education Act (HEA). The Commission and its member institutions take direction from the Commission Policy on Institutional Compliance with Title IV. The Commission provides, upon request from the U.S. Secretary of Education, any information sought regarding institutional compliance with Title IV regulations of the HEA.

Within 30 days of the Commission’s decision, the Commission notifies the U.S. Department of Education and appropriate state licensing or authorizing agencies and accrediting bodies of all institutional actions. If the Commission’s final decision is to deny, withdraw, suspend, or terminate the accreditation or preaccreditation of an institution or to put an institution on probation or show cause, the written notification to the U.S. Secretary of Education, appropriate state licensing or authorizing agencies and accrediting bodies will be provided at the same time as the institution is notified, and the written notification to the public will be provided within 24 hours of notice to the institution.

No later than 60 days after a decision to place an institution on probation or show cause or to terminate or deny the accreditation or candidacy of an institution, the Commission will make available to the U.S. Secretary of Education, the appropriate licensing or authorizing agency, and the public, a brief statement summarizing the reasons for the Commission’s decision, and the comments, if any, that the affected institution may wish to make with regard to that decision.

The Commission notifies the U.S. Secretary of Education if an accredited or preaccredited institution decides to withdraw voluntarily from accreditation or preaccreditation, or if the institution lets its accreditation or preaccreditation lapse. The Commission will notify the U.S. Secretary of Education within 30 days of receiving notification from the institution of the date that it is withdrawing voluntarily or of the date on which accreditation or preaccreditation lapses.

Copies of publications, such as the Commission newsletter are routinely sent to the state and federal agencies with which the Commission communicates. The ACCJC Directory of Accredited Institutions, which is continuously updated, is available on the Commission website (www.accjc.org).

The Commission maintains regular communication with the U.S. Department of Education and relevant state agencies. On request from the U.S. Department of Education or relevant state agency, information about the accreditation or preaccreditation status of an institution or about adverse actions on an institution will be provided.
The Commission responds to inquiries from government agencies and forwards responses to complaints against institutions that have been routed to the Commission by those agencies. If a conflict occurs between Accreditation Standards and state or local laws governing an institution seeking accreditation, the Commission will undertake appropriate consultation toward resolution of the conflict.

In the event clear evidence of Title IV fraud and abuse is obtained by the Commission, that information is forwarded to the U.S. Department of Education. Institutions are notified and asked to respond if complaints or allegations of fraud and abuse are communicated to the Commission by the Department of Education.

The Commission submits to the U.S. Secretary of Education any proposed changes in policy and procedures, Eligibility Requirements, or Accreditation Standards that might alter its scope of recognition or its compliance with appropriate federal regulation. 34 C.F.R. § 602.27(d).

When a state authorizing or licensing agency has notified the Commission of its revocation of an institution’s license or authorization, then the Commission will require a teach-out plan of that institution in accordance with the Policy on Closing an Institution. If an institution has closed without a teach-out plan, the Commission will work with the U.S. Department of Education and other agencies to assist students who have been affected by the closure.

The Commission will not, except where exceptional circumstances exist, renew the accreditation or preaccreditation of any institution that is subject to adverse action by any other recognized institutional accrediting agency or state agency. If accreditation or preaccreditation is granted in such a case, the Commission will provide documentation of the reasons for the action to the U.S. Department of Education and to the other accrediting agency or state agency within 30 days of such action.
The Commission initiates a systematic and comprehensive review of its Accreditation Standards and practices every six years. The review is designed to assess the utility, effectiveness and relevance of the Accreditation Standards and practices, and to ensure that they are updated to align with changing institutional characteristics, societal needs, and federal regulations. Information from multiple sources, including input from internal and external constituencies, is used in the review. If the Commission determines that changes to the Accreditation Standards are needed, then it announces its intent to change the Standards.1

The review may result in formative and clarifying improvements, or in significant changes, to Accreditation Standards and practices as deemed appropriate by the Commission. At the time of each review, the Commission will also seek to align Accreditation Standards and practices with federal regulatory requirements and with excellent practices in higher education accreditation.

The Review Process
The Commission makes available to the public information announcing the Review, the Commission’s means of soliciting input on Accreditation Standards and practices, and a tentative timeline for completing the review and issuing new Accreditation Standards. The Commission also provides periodic updates to member institutions on its progress in reviewing and developing new Accreditation Standards and practices through communications to member institutions and other constituencies, notices on its website, and its newsletter.

The process for review of Accreditation Standards and practices:
1. Examines whether the Standards and practices are adequate to evaluate institutional and educational quality;
2. Examines whether the Standards are relevant to the educational needs of students;
3. Examines each standard and the Standards as a whole;
4. Examines the accreditation practices that implement Accreditation Standards and Commission policies;
5. Solicits suggestions from internal constituencies such as Commissioners and Commission staff, member institutions and their staffs and governing board members, and persons who serve as evaluation team members;

1 If, during a review process, the Commission determines changes to the Accreditation Standards are needed, then the Commission is required to initiate action within 12 months to make the changes, and must complete the action within a reasonable period of time. 34 C.F.R. 602.21(c).
6. Solicits suggestions from communities of interest or with special expertise in accreditation related matters; and

7. Solicits suggestions from external constituencies such as students, business leaders and other members of the public served by member institutions.

Development and Approval of New Accreditation Standards

The Commission may use the assistance of special topic task forces, accreditation experts, an editorial board or drafting committee, and persons from member colleges when drafting proposed language for the Accreditation Standards.

The Commission provides opportunity to member institutions and their staffs and governing board members, college systems to which they may belong, students, business leaders and other members of the public, and other higher education associations to comment on proposed changes to Accreditation Standards. These individuals and groups are invited to send written comments to the Commission and/or to testify at public hearings and meetings scheduled by the Commission. The comments thus gathered are taken into account as the Commission finalizes any revisions to Accreditation standards.

When the Commission has developed a final draft of the Accreditation Standards, it will announce the date and location for a Commission meeting at which the Accreditation Standards will be considered for first reading, and will invite comment on that draft through a public hearing. In order to facilitate constituency and public input, the Commission may conduct additional public hearings throughout the Western region on the final draft Accreditation Standards. The Commission will announce the date and location for a Commission meeting at which the Accreditation Standards will be considered for second reading and adoption, and will invite comment before taking action to adopt the new Accreditation Standards.

Changes to Standards between Reviews

The above notwithstanding, if the Commission identifies a need to change the standards between reviews\(^2\), the process for ensuring constituent participation is consistent with the process used during six-year standard reviews. When the Commission identifies a need to change the Accreditation Standards, it will initiate action within twelve months. The process for drafting and approving new standards normally will be completed within two years.

The Commission further reserves the right to make small editorial changes to the language of Accreditation Standards designed to clarify meaning on an as-needed basis through the normal Commission meeting process with a first and second reading, and will provide notice to member institutions of the opportunity for institutional and public comment on such proposed editorial changes before adoption.

\(^2\) The USDE can require accrediting bodies to make changes to Accreditation Standards and policies within one year of adoption of new regulations or discovery by the USDE that an accreditor’s Standards are not compliant with federal regulations. In such cases, the ACCJC will need to respond within the one year time frame.

34 C.F.R. §602.36.
Commissioners, ACCJC committee members, and members of evaluation teams, in the course of reviewing institutions, may be given copies of confidential documents pertaining to ACCJC’s business and to the institutions under review. Confidential documents include, but are not limited to, personal notes by the Commissioners, team and committee members, institutional self-evaluations, team reports, committee reports, institutional audits, letters or memos to or from ACCJC affecting the institution, draft action letters, evidentiary documents provided by an institution, and any documents containing information that would generally be considered proprietary by the institution.

Commissioners, team and committee members should consider all documents pertaining to an institution as highly confidential, unless the documents are explicitly identified in writing to the contrary. Accordingly, Commissioners, team and committee members must take reasonable measures to assure the confidentiality of documents in their possession and may only discuss the contents of such documents with anyone required to have the information in connection with the matter under review.

At such time as continued possession of such documents is no longer necessary, Commissioners, team and committee members who are in possession of such documents will be expected either to return them to ACCJC’s President (or to the President’s designee) or destroy them by having them shredded. Commissioners, team and committee members are not permitted to physically or electronically store or retain such documents in their possession following their usage for the relevant institutional review. At the adjournment of Commission, team, and committee meetings, the responsible ACCJC staff representative may ask that some or all of the documents pertaining to the institution be returned to the ACCJC office by delivering them to the staff person.
2002 Eligibility Requirements for Accreditation, for evaluations through Fall 2015
Introduction

Eligible institutions offering one or more programs of two academic years leading to the Associate Degree, located in the states of Hawai‘i and California, the territories of Guam and American Samoa, the Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, the Republic of Palau, and the Republic of the Marshall Islands may apply to the Commission for candidacy.

Prior to making a formal application, an institution wishing to become a Candidate for Accreditation must begin by assessing itself in relation to the basic criteria for institutional eligibility, stated below. The institution should also review the Accreditation Standards and Commission policies, as they will provide a clear statement of ultimate Commission expectations of institutional performance and quality and give further definition to the eligibility criteria. The eligibility process is designed to screen institutions prior to a period of formal and extensive institutional self evaluation (formerly self study) so that only institutions which meet the basic criteria for eligibility may proceed.

The Commission uses the same institutional self evaluation and site visit process for both candidacy and accreditation applications. The results of a candidacy, or initial accreditation visit could be denial, candidacy, or accreditation. Clearly, the history of the applicant institution will have great bearing on the Commission’s decision.

Eligibility Requirements

In order to achieve eligibility, the institution must completely meet all Eligibility Requirements. Compliance with the Eligibility Requirements is expected to be continuous and will be validated periodically, normally as part of every Institutional Self Evaluation process and Educational Quality and Institutional Effectiveness Review.

Institutions that have achieved accreditation are expected to include in their Institutional Self Evaluation Report information demonstrating that they continue to meet the eligibility requirements.

1. Authority

The institution is authorized or licensed to operate as an educational institution and to award degrees by an appropriate governmental organization or agency as required by each of the jurisdictions or regions in which it operates.

Private institutions, if required by the appropriate statutory regulatory body, must submit evidence of authorization, licensure, or approval by that body. If incorporated, the institution shall submit a copy of its articles of incorporation.
2. **Mission**
   The institution’s educational mission is clearly defined, adopted, and published by its governing board consistent with its legal authorization, and is appropriate to a degree-granting institution of higher education and the constituency it seeks to serve. The mission statement defines institutional commitment to achieving student learning.

3. **Governing Board**
   The institution has a functioning governing board responsible for the quality, integrity, and financial stability of the institution and for ensuring that the institution’s mission is being carried out. This board is ultimately responsible for ensuring that the financial resources of the institution are used to provide a sound educational program. Its membership is sufficient in size and composition to fulfill all board responsibilities.

   The governing board is an independent policy-making body capable of reflecting constituent and public interest in board activities and decisions. A majority of the board members have no employment, family, ownership, or other personal financial interest in the institution. The board adheres to a conflict of interest policy that assures that those interests are disclosed and that they do not interfere with the impartiality of governing body members or outweigh the greater duty to secure and ensure the academic and fiscal integrity of the institution.

4. **Chief Executive Officer**
   The institution has a chief executive officer appointed by the governing board, whose full-time responsibility is to the institution, and who possesses the requisite authority to administer board policies. Neither the district/system chief executive officer nor the institutional chief executive officer may serve as the chair of the governing board. The institution informs the Commission immediately when there is a change in the institutional chief executive officer.

5. **Administrative Capacity**
   The institution has sufficient staff, with appropriate preparation and experience to provide the administrative services necessary to support its mission and purpose.

6. **Operational Status**
   The institution is operational, with students actively pursuing its degree programs.

7. **Degrees**
   A substantial portion of the institution’s educational offerings are programs that lead to degrees, and a significant proportion of its students are enrolled in them.

8. **Educational Programs**
   The institution’s principal degree programs are congruent with its mission, are based on recognized higher education field(s) of study, are of sufficient content and length, are conducted at levels of quality and rigor appropriate to the degrees offered, and culminate in identified student outcomes. At least one degree program must be of two academic years in length.
9. **Academic Credit**

The institution awards academic credits based on generally accepted practices in degree-granting institutions of higher education. Public institutions governed by statutory or system regulatory requirements provide appropriate information about the awarding of academic credit.

10. **Student Learning and Achievement**

The institution defines and publishes for each program the program's expected student learning and achievement outcomes. Through regular and systematic assessment, it demonstrates that students who complete programs, no matter where or how they are offered, achieve these outcomes.

11. **General Education**

The institution defines and incorporates into all of its degree programs a substantial component of general education designed to ensure breadth of knowledge and promote intellectual inquiry. The general education component includes demonstrated competence in writing and computational skills and an introduction to some of the major areas of knowledge. General education has comprehensive learning outcomes for the students who complete it. Degree credit for general education programs must be consistent with levels of quality and rigor appropriate to higher education. See the Accreditation Standards, II.A.3, for areas of study for general education.

12. **Academic Freedom**

The institution’s faculty and students are free to examine and test all knowledge appropriate to their discipline or area of major study as judged by the academic/educational community in general. Regardless of institutional affiliation or sponsorship, the institution maintains an atmosphere in which intellectual freedom and independence exist.

13. **Faculty**

The institution has a substantial core of qualified faculty with full-time responsibility to the institution. The core is sufficient in size and experience to support all of the institution’s educational programs. A clear statement of faculty responsibilities must include development and review of curriculum as well as assessment of learning.

14. **Student Services**

The institution provides for all of its students appropriate student services that support student learning and development within the context of the institutional mission.

15. **Admissions**

The institution has adopted and adheres to admission policies consistent with its mission that specify the qualifications of students appropriate for its programs.
16. Information and Learning Resources
The institution provides, through ownership or contractual agreement, specific long-term access to sufficient information and learning resources and services to support its mission and instructional programs in whatever format and wherever they are offered.

17. Financial Resources
The institution documents a funding base, financial resources, and plans for financial development adequate to support student learning programs and services, to improve institutional effectiveness, and to assure financial stability.

18. Financial Accountability
The institution annually undergoes and makes available an external financial audit by a certified public accountant or an audit by an appropriate public agency. The institution shall submit with its eligibility application a copy of the budget and institutional financial audits and management letters prepared by an outside certified public accountant or by an appropriate public agency, who has no other relationship to the institution, for its two most recent fiscal years, including the fiscal year ending immediately prior to the date of the submission of the application. The audits must be certified and any exceptions explained. It is recommended that the auditor employ as a guide Audits of Colleges and Universities, published by the American Institute of Certified Public Accountants. An applicant institution must not show an annual or cumulative operating deficit at any time during the eligibility application process. Institutions that are already Title IV eligible must demonstrate compliance with federal requirements.

19. Institutional Planning and Evaluation
The institution systematically evaluates and makes public how well and in what ways it is accomplishing its purposes, including assessment of student learning outcomes. The institution provides evidence of planning for improvement of institutional structures and processes, student achievement of educational goals, and student learning. The institution assesses progress toward achieving its stated goals and makes decisions regarding improvement through an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and re-evaluation.

20. Integrity in Communication with the Public
The institution provides a print or electronic catalog for its constituencies with precise, accurate, and current information concerning the following (34 C.F.R. § 668.41-43; § 668.71-75.):

General Information
- Official Name, Address(es), Telephone Number(s), and Website Address of the Institution
- Educational Mission
- Course, Program, and Degree Offerings
- Academic Calendar and Program Length
• Academic Freedom Statement
• Available Student Financial Aid
• Available Learning Resources
• Names and Degrees of Administrators and Faculty
• Names of Governing Board Members

Requirements
• Admissions
• Student Fees and Other Financial Obligations
• Degree, Certificates, Graduation and Transfer

Major Policies Affecting Students
• Academic Regulations, including Academic Honesty
• Nondiscrimination
• Acceptance of Transfer Credits
• Grievance and Complaint Procedures
• Sexual Harassment
• Refund of Fees

Locations or Publications Where Other Policies may be Found

21. Integrity in Relations with the Accrediting Commission

The institution provides assurance that it adheres to the Eligibility Requirements and Accreditation Standards and policies of the Commission, describes itself in identical terms to all its accrediting agencies, communicates any changes in its accredited status, and agrees to disclose information required by the Commission to carry out its accrediting responsibilities. The institution will comply with Commission requests, directives, decisions and policies, and will make complete, accurate, and honest disclosure. Failure to do so is sufficient reason, in and of itself, for the Commission to impose a sanction, or to deny or revoke candidacy or accreditation. (34 C.F.R. § 668 – misrepresentation.)
2002 Accreditation Standards, for evaluations through Fall 2015
Introduction: Shaping the Dialogue

The primary purpose of an ACCJC-accredited institution is to foster learning in its students. An effective institution ensures that its resources and processes support student learning, continuously assesses that learning, and pursues institutional excellence and improvement. An effective institution maintains an ongoing, self-reflective dialogue about its quality and improvement.

An institution-wide dialogue must be at the heart of the self evaluation process for the college community to gain a comprehensive perspective of the institution. Although the Standards are presented in four parts, they work together to facilitate this dialogue on the institution’s effectiveness and on ways in which it may improve. The self evaluation provides the Commission with the institution’s assessment of itself as a whole.

The Standards

The institutional mission provides the impetus for achieving student learning and other goals that the institution endeavors to accomplish. The institution provides the means for students to learn, assesses how well learning is occurring, and strives to improve that learning through ongoing, systematic, and integrated planning (Standard I). Instructional programs, student support services, and library and learning support services facilitate the achievement of the institution’s stated student learning outcomes (Standard II). Human, physical, technology, and financial resources enable these programs and services to function and improve (Standard III). Ethical and effective leadership throughout the organization guides the accomplishment of the mission and supports institutional effectiveness and improvement (Standard IV).

A college-wide dialogue that integrates the elements of the Standards provides the complete view of the institution that is needed to verify integrity and to promote quality and improvement.
Standard I: Institutional Mission and Effectiveness

The institution demonstrates strong commitment to a mission that emphasizes achievement of student learning and to communicating the mission internally and externally. The institution uses analyses of quantitative and qualitative data in an ongoing and systematic cycle of evaluation, integrated planning, implementation, and re-evaluation to verify and improve the effectiveness by which the mission is accomplished.

A. Mission

The institution has a statement of mission that defines the institution’s broad educational purposes, its intended student population, and its commitment to achieving student learning.

1. The institution establishes student learning programs and services aligned with its purposes, its character, and its student population.

2. The mission statement is approved by the governing board and published.

3. Using the institution’s governance and decision-making processes, the institution reviews its mission statement on a regular basis and revises it as necessary.

4. The institution’s mission is central to institutional planning and decision making.

B. Improving Institutional Effectiveness

The institution demonstrates a conscious effort to produce and support student learning, measures that learning, assesses how well learning is occurring, and makes changes to improve student learning. The institution also organizes its key processes and allocates its resources to effectively support student learning. The institution demonstrates its effectiveness by providing 1) evidence of the achievement of student learning outcomes and 2) evidence of institution and program performance. The institution uses ongoing and systematic evaluation and planning to refine its key processes and improve student learning.

1. The institution maintains an ongoing, collegial, self-reflective dialogue about the continuous improvement of student learning and institutional processes.

2. The institution sets goals to improve its effectiveness consistent with its stated purposes. The institution articulates its goals and states the objectives derived from them in measurable terms so that the degree to which they are achieved can be determined and widely discussed. The institutional members understand these goals and work collaboratively toward their achievement.

3. The institution assesses progress toward achieving its stated goals and makes decisions regarding the improvement of institutional effectiveness in an ongoing and systematic cycle of evaluation, integrated planning, resource allocation, implementation, and re-evaluation. Evaluation is based on analyses of both quantitative and qualitative data.
4. The institution provides evidence that the planning process is broad-based, offers opportunities for input by appropriate constituencies, allocates necessary resources, and leads to improvement of institutional effectiveness.

5. The institution uses documented assessment results to communicate matters of quality assurance to appropriate constituencies.

6. The institution assures the effectiveness of its ongoing planning and resource allocation processes by systematically reviewing and modifying, as appropriate, all parts of the cycle, including institutional and other research efforts.

7. The institution assesses its evaluation mechanisms through a systematic review of their effectiveness in improving instructional programs, student support services, and library and other learning support services.
Standard II: Student Learning Programs and Services

The institution offers high-quality instructional programs, student support services, and library and learning support services that facilitate and demonstrate the achievement of stated student learning outcomes. The institution provides an environment that supports learning, enhances student understanding and appreciation of diversity, and encourages personal and civic responsibility as well as intellectual, aesthetic, and personal development for all of its students.

A. Instructional Programs

The institution offers high-quality instructional programs in recognized and emerging fields of study that culminate in identified student outcomes leading to degrees, certificates, employment, or transfer to other higher education institutions or programs consistent with its mission. Instructional programs are systematically assessed in order to assure currency, improve teaching and learning strategies, and achieve stated student learning outcomes. The provisions of this Standard are broadly applicable to all instructional activities offered in the name of the institution.

1. The institution demonstrates that all instructional programs, regardless of location or means of delivery, address and meet the mission of the institution and uphold its integrity.1

   a. The institution identifies and seeks to meet the varied educational needs of its students through programs consistent with their educational preparation and the diversity, demographics, and economy of its communities. The institution relies upon research and analysis to identify student learning needs and to assess progress toward achieving stated learning outcomes.

   b. The institution utilizes delivery systems and modes of instruction compatible with the objectives of the curriculum and appropriate to the current and future needs of its students.1

   c. The institution identifies student learning outcomes for courses, programs, certificates, and degrees; assesses student achievement of those outcomes; and uses assessment results to make improvements.

2. The institution assures the quality and improvement of all instructional courses and programs offered in the name of the institution, including collegiate, developmental, and pre-collegiate courses and programs, continuing and community education, study abroad, short-term training courses and programs, programs for international students, and contract or other special programs, regardless of type of credit awarded, delivery mode, or location.1,2

   a. The institution uses established procedures to design, identify learning outcomes for, approve, administer, deliver, and evaluate courses and programs. The institution recognizes the central role of its faculty for establishing quality and improving instructional courses and programs.

   b. The institution relies on faculty expertise and the assistance of advisory committees when appropriate to identify competency levels and measurable student learning outcomes for courses, certificates, programs including general
and vocational education, and degrees. The institution regularly assesses student progress towards achieving those outcomes.

c. High-quality instruction and appropriate breadth, depth, rigor, sequencing, time to completion, and synthesis of learning characterize all programs.

d. The institution uses delivery modes and teaching methodologies that reflect the diverse needs and learning styles of its students.¹

e. The institution evaluates all courses and programs through an on-going systematic review of their relevance, appropriateness, achievement of learning outcomes, currency, and future needs and plans.

f. The institution engages in ongoing, systematic evaluation and integrated planning to assure currency and measure achievement of its stated student learning outcomes for courses, certificates, programs including general and vocational education, and degrees. The institution systematically strives to improve those outcomes and makes the results available to appropriate constituencies.

g. If an institution uses departmental course and/or program examinations, it validates their effectiveness in measuring student learning and minimizes test biases.

h. The institution awards credit based on student achievement of the course’s stated learning outcomes. Units of credit awarded are consistent with institutional policies that reflect generally accepted norms or equivalencies in higher education.³

i. The institution awards degrees and certificates based on student achievement of a program’s stated learning outcomes.

3. The institution requires of all academic and vocational degree programs a component of general education based on a carefully considered philosophy that is clearly stated in its catalog. The institution, relying on the expertise of its faculty, determines the appropriateness of each course for inclusion in the general education curriculum by examining the stated learning outcomes for the course.

General education has comprehensive learning outcomes for the students who complete it, including the following:

a. An understanding of the basic content and methodology of the major areas of knowledge: areas include the humanities and fine arts, the natural sciences, and the social sciences.

b. A capability to be a productive individual and life-long learner: skills include oral and written communication, information competency, computer literacy, scientific and quantitative reasoning, critical analysis/logical thinking, and the ability to acquire knowledge through a variety of means.

c. A recognition of what it means to be an ethical human being and effective citizen: qualities include an appreciation of ethical principles; civility and interpersonal skills; respect for cultural diversity; historical and aesthetic sensitivity; and the willingness to assume civic, political, and social responsibilities locally, nationally, and globally.
4. All degree programs include focused study in at least one area of inquiry or in an established interdisciplinary core.

5. Students completing vocational and occupational certificates and degrees demonstrate technical and professional competencies that meet employment and other applicable standards and are prepared for external licensure and certification.

6. The institution assures that students and prospective students receive clear and accurate information about educational courses and programs and transfer policies. The institution describes its degrees and certificates in terms of their purpose, content, course requirements, and expected student learning outcomes. In every class section students receive a course syllabus that specifies learning outcomes consistent with those in the institution’s officially approved course outline.

   a. The institution makes available to its students clearly stated transfer-of-credit policies in order to facilitate the mobility of students without penalty. In accepting transfer credits to fulfill degree requirements, the institution certifies that the expected learning outcomes for transferred courses are comparable to the learning outcomes of its own courses. Where patterns of student enrollment between institutions are identified, the institution develops articulation agreements as appropriate to its mission.

   b. When programs are eliminated or program requirements are significantly changed, the institution makes appropriate arrangements so that enrolled students may complete their education in a timely manner with a minimum of disruption.

   c. The institution represents itself clearly, accurately, and consistently to prospective and current students, the public, and its personnel through its catalogs, statements, and publications, including those presented in electronic formats. It regularly reviews institutional policies, procedures, and publications to assure integrity in all representations about its mission, programs, and services.

7. In order to assure the academic integrity of the teaching-learning process, the institution uses and makes public governing board-adopted policies on academic freedom and responsibility, student academic honesty, and specific institutional beliefs or world views. These policies make clear the institution’s commitment to the free pursuit and dissemination of knowledge.

   a. Faculty distinguish between personal conviction and professionally accepted views in a discipline. They present data and information fairly and objectively.

   b. The institution establishes and publishes clear expectations concerning student academic honesty and the consequences for dishonesty.

   c. Institutions that require conformity to specific codes of conduct of staff, faculty, administrators, or students, or that seek to instill specific beliefs or world views, give clear prior notice of such policies, including statements in the catalog and/or appropriate faculty or student handbooks.

8. Institutions offering curricula in foreign locations to students other than U.S. nationals operate in conformity with Standards and applicable Commission policies.
B. Student Support Services

The institution recruits and admits diverse students who are able to benefit from its programs, consistent with its mission. Student support services address the identified needs of students and enhance a supportive learning environment. The entire student pathway through the institutional experience is characterized by a concern for student access, progress, learning, and success. The institution systematically assesses student support services using student learning outcomes, faculty and staff input, and other appropriate measures in order to improve the effectiveness of these services.

1. The institution assures the quality of student support services and demonstrates that these services, regardless of location or means of delivery, support student learning and enhance achievement of the mission of the institution.¹, ²

2. The institution provides a catalog for its constituencies with precise, accurate, and current information concerning the following:

   a. General Information
      • Official Name, Address(es), Telephone Number(s), and Website Address of the Institution
      • Educational Mission
      • Course, Program, and Degree Offerings
      • Academic Calendar and Program Length
      • Academic Freedom Statement
      • Available Student Financial Aid
      • Available Learning Resources
      • Names and Degrees of Administrators and Faculty
      • Names of Governing Board Members

   b. Requirements
      • Admissions
      • Student Fees and Other Financial Obligations
      • Degree, Certificates, Graduation and Transfer

   c. Major Policies Affecting Students
      • Academic Regulations, including Academic Honesty
      • Nondiscrimination
      • Acceptance of Transfer Credits
      • Grievance and Complaint Procedures
      • Sexual Harassment
      • Refund of Fees

   d. Locations or Publications Where Other Policies may be Found.
3. The institution researches and identifies the learning support needs of its student population and provides appropriate services and programs to address those needs.
   a. The institution assures equitable access to all of its students by providing appropriate, comprehensive, and reliable services to students regardless of service location or delivery method.¹
   b. The institution provides an environment that encourages personal and civic responsibility, as well as intellectual, aesthetic, and personal development for all of its students.
   c. The institution designs, maintains, and evaluates counseling and/or academic advising programs to support student development and success and prepares faculty and other personnel responsible for the advising function.
   d. The institution designs and maintains appropriate programs, practices, and services that support and enhance student understanding and appreciation of diversity.
   e. The institution regularly evaluates admissions and placement instruments and practices to validate their effectiveness while minimizing biases.
   f. The institution maintains student records permanently, securely, and confidentially, with provision for secure backup of all files, regardless of the form in which those files are maintained. The institution publishes and follows established policies for release of student records.

4. The institution evaluates student support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.
C. Library and Learning Support Services

Library and other learning support services for students are sufficient to support the institution's instructional programs and intellectual, aesthetic, and cultural activities in whatever format and wherever they are offered. Such services include library services and collections, tutoring, learning centers, computer laboratories, and learning technology development and training. The institution provides access and training to students so that library and other learning support services may be used effectively and efficiently. The institution systematically assesses these services using student learning outcomes, faculty input, and other appropriate measures in order to improve the effectiveness of the services.

1. The institution supports the quality of its instructional programs by providing library and other learning support services that are sufficient in quantity, currency, depth, and variety to facilitate educational offerings, regardless of location or means of delivery.¹
   
a. Relying on appropriate expertise of faculty, including librarians and other learning support services professionals, the institution selects and maintains educational equipment and materials to support student learning and enhance the achievement of the mission of the institution.

b. The institution provides ongoing instruction for users of library and other learning support services so that students are able to develop skills in information competency.

c. The institution provides students and personnel responsible for student learning programs and services adequate access to the library and other learning support services, regardless of their location or means of delivery.¹

d. The institution provides effective maintenance and security for its library and other learning support services.

e. When the institution relies on or collaborates with other institutions or other sources for library and other learning support services for its instructional programs, it documents that formal agreements exist and that such resources and services are adequate for the institution’s intended purposes, are easily accessible, and utilized. The performance of these services is evaluated on a regular basis. The institution takes responsibility for and assures the reliability of all services provided either directly or through contractual arrangement.

2. The institution evaluates library and other learning support services to assure their adequacy in meeting identified student needs. Evaluation of these services provides evidence that they contribute to the achievement of student learning outcomes. The institution uses the results of these evaluations as the basis for improvement.
Standard III: Resources

The institution effectively uses its human, physical, technology, and financial resources to achieve its broad educational purposes, including stated student learning outcomes, and to improve institutional effectiveness. Accredited colleges in multi-college systems may be organized such that responsibility for resources, allocation of resources and planning rests with the system. In such cases, the system is responsible for meeting standards on behalf of the accredited colleges.

A. Human Resources

The institution employs qualified personnel to support student learning programs and services wherever offered and by whatever means delivered, and to improve institutional effectiveness. Personnel are treated equitably, are evaluated regularly and systematically, and are provided opportunities for professional development. Consistent with its mission, the institution demonstrates its commitment to the significant educational role played by persons of diverse backgrounds by making positive efforts to encourage such diversity. Human resource planning is integrated with institutional planning.

1. The institution assures the integrity and quality of its programs and services by employing personnel who are qualified by appropriate education, training, and experience to provide and support these programs and services.

   a. Criteria, qualifications, and procedures for selection of personnel are clearly and publicly stated. Job descriptions are directly related to institutional mission and goals and accurately reflect position duties, responsibilities, and authority. Criteria for selection of faculty include knowledge of the subject matter or service to be performed (as determined by individuals with discipline expertise), effective teaching, scholarly activities, and potential to contribute to the mission of the institution. Institutional faculty play a significant role in selection of new faculty. Degrees held by faculty and administrators are from institutions accredited by recognized U.S. accrediting agencies. Degrees from non-U.S. institutions are recognized only if equivalence has been established.

   b. The institution assures the effectiveness of its human resources by evaluating all personnel systematically and at stated intervals. The institution establishes written criteria for evaluating all personnel, including performance of assigned duties and participation in institutional responsibilities and other activities appropriate to their expertise. Evaluation processes seek to assess effectiveness of personnel and encourage improvement. Actions taken following evaluations are formal, timely, and documented.

   c. Faculty and others directly responsible for student progress toward achieving stated student learning outcomes have, as a component of their evaluation, effectiveness in producing those learning outcomes.

   d. The institution upholds a written code of professional ethics for all of its personnel.
2. The institution maintains a sufficient number of qualified faculty with full-time responsibility to the institution. The institution has a sufficient number of staff and administrators with appropriate preparation and experience to provide the administrative services necessary to support the institution’s mission and purposes.

3. The institution systematically develops personnel policies and procedures that are available for information and review. Such policies and procedures are equitably and consistently administered.
   a. The institution establishes and adheres to written policies ensuring fairness in all employment procedures.
   b. The institution makes provision for the security and confidentiality of personnel records. Each employee has access to his/her personnel records in accordance with law.

4. The institution demonstrates through policies and practices an appropriate understanding of and concern for issues of equity and diversity.
   a. The institution creates and maintains appropriate programs, practices, and services that support its diverse personnel.
   b. The institution regularly assesses its record in employment equity and diversity consistent with its mission.
   c. The institution subscribes to, advocates, and demonstrates integrity in the treatment of its administration, faculty, staff and students.

5. The institution provides all personnel with appropriate opportunities for continued professional development, consistent with the institutional mission and based on identified teaching and learning needs.
   a. The institution plans professional development activities to meet the needs of its personnel.
   b. With the assistance of the participants, the institution systematically evaluates professional development programs and uses the results of these evaluations as the basis for improvement.

6. Human resource planning is integrated with institutional planning. The institution systematically assesses the effective use of human resources and uses the results of the evaluation as the basis for improvement.

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B. Physical Resources

Physical resources, which include facilities, equipment, land, and other assets, support student learning programs and services and improve institutional effectiveness. Physical resource planning is integrated with institutional planning.

1. The institution provides safe and sufficient physical resources that support and assure the integrity and quality of its programs and services, regardless of location or means of delivery.
   a. The institution plans, builds, maintains, and upgrades or replaces its physical resources in a manner that assures effective utilization and the continuing quality necessary to support its programs and services.
   b. The institution assures that physical resources at all locations where it offers courses, programs, and services are constructed and maintained to assure access, safety, security, and a healthful learning and working environment.

2. To assure the feasibility and effectiveness of physical resources in supporting institutional programs and services, the institution plans and evaluates its facilities and equipment on a regular basis, taking utilization and other relevant data into account.
   a. Long-range capital plans support institutional improvement goals and reflect projections of the total cost of ownership of new facilities and equipment.
   b. Physical resource planning is integrated with institutional planning. The institution systematically assesses the effective use of physical resources and uses the results of the evaluation as the basis for improvement.
C. Technology Resources

Technology resources are used to support student learning programs and services and to improve institutional effectiveness. Technology planning is integrated with institutional planning.

1. The institution assures that any technology support it provides is designed to meet the needs of learning, teaching, college-wide communications, research, and operational systems.
   a. Technology services, professional support, facilities, hardware, and software are designed to enhance the operation and effectiveness of the institution.
   b. The institution provides quality training in the effective application of its information technology to students and personnel.
   c. The institution systematically plans, acquires, maintains, and upgrades or replaces technology infrastructure and equipment to meet institutional needs.
   d. The distribution and utilization of technology resources support the development, maintenance, and enhancement of its programs and services.

2. Technology planning is integrated with institutional planning. The institution systematically assesses the effective use of technology resources and uses the results of evaluation as the basis for improvement.

D. Financial Resources

Financial resources are sufficient to support student learning programs and services and to improve institutional effectiveness. The distribution of resources supports the development, maintenance, and enhancement of programs and services. The institution plans and manages its financial affairs with integrity and in a manner that ensures financial stability. The level of financial resources provides a reasonable expectation of both short-term and long-term financial solvency. Financial resources planning is integrated with institutional planning at both college and district/system levels in multi-college systems.

1. The institution’s mission and goals are the foundation for financial planning.
   a. Financial planning is integrated with and supports all institutional planning.
   b. Institutional planning reflects realistic assessment of financial resource availability, development of financial resources, partnerships, and expenditure requirements.
   c. When making short-range financial plans, the institution considers its long-range financial priorities to assure financial stability. The institution clearly identifies, plans, and allocates resources for payment of liabilities and future obligations.
   d. The institution clearly defines and follows its guidelines and processes for financial planning and budget development, with all constituencies having appropriate opportunities to participate in the development of institutional plans and budgets.
2. To assure the financial integrity of the institution and responsible use of its financial resources, the internal control structure has appropriate control mechanisms and widely disseminates dependable and timely information for sound financial decision making.

   a. Financial documents, including the budget and independent audit, have a high degree of credibility and accuracy, and reflect appropriate allocation and use of financial resources to support student learning programs and services.

   b. Institutional responses to external audit findings are comprehensive, timely, and communicated appropriately.

   c. Appropriate financial information is provided throughout the institution in a timely manner.

   d. All financial resources, including short and long term debt instruments (such as bonds and Certificates of Participation), auxiliary activities, fund-raising efforts, and grants, are used with integrity in a manner consistent with the intended purpose of the funding source.

   e. The institution’s internal control systems are evaluated and assessed for validity and effectiveness and the results of this assessment are used for improvement.

3. The institution has policies and procedures to ensure sound financial practices and financial stability.

   a. The institution has sufficient cash flow and reserves to maintain stability, strategies for appropriate risk management, and develops contingency plans to meet financial emergencies and unforeseen occurrences.

   b. The institution practices effective oversight of finances, including management of financial aid, grants, externally funded programs, contractual relationships, auxiliary organizations or foundations, and institutional investments and assets.

   c. The institution plans for and allocates appropriate resources for the payment of liabilities and future obligations, including Other Post-Employment Benefits (OPEB), compensated absences, and other employee related obligations.

   d. The actuarial plan to determine Other Post-Employment Benefits (OPEB) is prepared, as required by appropriate accounting standards.

   e. On an annual basis, the institution assesses and allocates resources for the repayment of any locally incurred debt instruments that can affect the financial condition of the institution.

   f. Institutions monitor and manage student loan default rates, revenue streams, and assets to ensure compliance with federal requirements.

   g. Contractual agreements with external entities are consistent with the mission and goals of the institution, governed by institutional policies, and contain appropriate provisions to maintain the integrity of the institution.

   h. The institution regularly evaluates its financial management practices and the results of the evaluation are used to improve internal control structures.
4. Financial resource planning is integrated with institutional planning. The institution systematically assesses the effective use of financial resources and uses the results of the evaluation as the basis for improvement of the institution.
Standard IV: Leadership and Governance

The institution recognizes and utilizes the contributions of leadership throughout the organization for continuous improvement of the institution. Governance roles are designed to facilitate decisions that support student learning programs and services and improve institutional effectiveness, while acknowledging the designated responsibilities of the governing board and the chief administrator.

A. Decision-Making Roles and Processes

The institution recognizes that ethical and effective leadership throughout the organization enables the institution to identify institutional values, set and achieve goals, learn, and improve.

1. Institutional leaders create an environment for empowerment, innovation, and institutional excellence. They encourage staff, faculty, administrators, and students, no matter what their official titles, to take initiative in improving the practices, programs, and services in which they are involved. When ideas for improvement have policy or significant institution-wide implications, systematic participative processes are used to assure effective discussion, planning, and implementation.

2. The institution establishes and implements a written policy providing for faculty, staff, administrator, and student participation in decision-making processes. The policy specifies the manner in which individuals bring forward ideas from their constituencies and work together on appropriate policy, planning, and special-purpose bodies.
   a. Faculty and administrators have a substantive and clearly defined role in institutional governance and exercise a substantial voice in institutional policies, planning, and budget that relate to their areas of responsibility and expertise. Students and staff also have established mechanisms or organizations for providing input into institutional decisions.
   b. The institution relies on faculty, its academic senate or other appropriate faculty structures, the curriculum committee, and academic administrators for recommendations about student learning programs and services.

3. Through established governance structures, processes, and practices, the governing board, administrators, faculty, staff, and students work together for the good of the institution. These processes facilitate discussion of ideas and effective communication among the institution’s constituencies.

4. The institution advocates and demonstrates honesty and integrity in its relationships with external agencies. It agrees to comply with Accrediting Commission Standards, policies, and guidelines, and Commission requirements for public disclosure, self evaluation and other reports, team visits, and prior approval of substantive changes. The institution moves expeditiously to respond to recommendations made by the Commission.

5. The role of leadership and the institution’s governance and decision-making structures and processes are regularly evaluated to assure their integrity and effectiveness. The institution widely communicates the results of these evaluations and uses them as the basis for improvement.
B. Board and Administrative Organization

In addition to the leadership of individuals and constituencies, institutions recognize the designated responsibilities of the governing board for setting policies and of the chief administrator for the effective operation of the institution. Multi-college districts/systems clearly define the organizational roles of the district/system and the colleges.

1. The institution has a governing board that is responsible for establishing policies to assure the quality, integrity, and effectiveness of the student learning programs and services and the financial stability of the institution. The governing board adheres to a clearly defined policy for selecting and evaluating the chief administrator for the college or the district/system.

   a. The governing board is an independent policy-making body that reflects the public interest in board activities and decisions. Once the board reaches a decision, it acts as a whole. It advocates for and defends the institution and protects it from undue influence or pressure.

   b. The governing board establishes policies consistent with the mission statement to ensure the quality, integrity, and improvement of student learning programs and services and the resources necessary to support them.

   c. The governing board has ultimate responsibility for educational quality, legal matters, and financial integrity.

   d. The institution or the governing board publishes the board bylaws and policies specifying the board’s size, duties, responsibilities, structure, and operating procedures.

   e. The governing board acts in a manner consistent with its policies and bylaws. The board regularly evaluates its policies and practices and revises them as necessary.

   f. The governing board has a program for board development and new member orientation. It has a mechanism for providing for continuity of board membership and staggered terms of office.

   g. The governing board’s self evaluation processes for assessing board performance are clearly defined, implemented, and published in its policies or bylaws.

   h. The governing board has a code of ethics that includes a clearly defined policy for dealing with behavior that violates its code.

   i. The governing board is informed about and involved in the accreditation process.

   j. The governing board has the responsibility for selecting and evaluating the district/system chief administrator (most often known as the chancellor) in a multi-college district/system or the college chief administrator (most often known as the president) in the case of a single college. The governing board delegates full responsibility and authority to him/her to implement and administer board policies without board interference and holds him/her accountable for the operation of the district/system or college, respectively.

   In multi-college districts/systems, the governing board establishes a clearly defined policy for selecting and evaluating the presidents of the colleges.
2. The president has primary responsibility for the quality of the institution he/she leads. He/she provides effective leadership in planning, organizing, budgeting, selecting and developing personnel, and assessing institutional effectiveness.

   a. The president plans, oversees, and evaluates an administrative structure organized and staffed to reflect the institution’s purposes, size, and complexity. He/she delegates authority to administrators and others consistent with their responsibilities, as appropriate.

   b. The president guides institutional improvement of the teaching and learning environment by the following:

      • establishing a collegial process that sets values, goals, and priorities;
      • ensuring that evaluation and planning rely on high quality research and analysis on external and internal conditions;
      • ensuring that educational planning is integrated with resource planning and distribution to achieve student learning outcomes; and
      • establishing procedures to evaluate overall institutional planning and implementation efforts.

   c. The president assures the implementation of statutes, regulations, and governing board policies and assures that institutional practices are consistent with institutional mission and policies.

   d. The president effectively controls budget and expenditures.

   e. The president works and communicates effectively with the communities served by the institution.

3. In multi-college districts or systems, the district/system provides primary leadership in setting and communicating expectations of educational excellence and integrity throughout the district/system and assures support for the effective operation of the colleges. It establishes clearly defined roles of authority and responsibility between the colleges and the district/system and acts as the liaison between the colleges and the governing board.  

   a. The district/system clearly delineates and communicates the operational responsibilities and functions of the district/system from those of the colleges and consistently adheres to this delineation in practice.

   b. The district/system provides effective services that support the colleges in their missions and functions.

   c. The district/system provides fair distribution of resources that are adequate to support the effective operations of the colleges.

   d. The district/system effectively controls its expenditures.

   e. The chancellor gives full responsibility and authority to the presidents of the colleges to implement and administer delegated district/system policies without his/her interference and holds them accountable for the operation of the colleges.
f. The district/system acts as the liaison between the colleges and the governing board. The district/system and the colleges use effective methods of communication, and they exchange information in a timely manner.

g. The district/system regularly evaluates district/system role delineation and governance and decision-making structures and processes to assure their integrity and effectiveness in assisting the colleges in meeting educational goals. The district/system widely communicates the results of these evaluations and uses them as the basis for improvement.
List of Policies Referenced in the Standards

1. Policy on Distance Education and on Correspondence Education

2. Policy on Principles of Good Practice in Overseas International Education Programs for Non-U.S. Nationals

3. Policy on Transfer of Credit; Policy on Award of Credit

4. Policy on Closing an Institution

5. Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status


7. Policy and Procedures for the Evaluation of Institutions in Multi-College/Multi-Unit Districts or Systems