



**Southern Association of Colleges and Schools
Commission on Colleges**

PRELIMINARY REPORT OF THE REAFFIRMATION COMMITTEE

**(Revised: January 2012
Edited: July 2014)**

Statement Regarding the Report

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

Name of the Institution:

Date of the Review:

COC Staff Member:

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

Part I. Overview and Introduction to the Institution

To be completed by the On-site Reaffirmation Committee.

Part II. Assessment of Compliance

Sections A thru E to be completed by the Off-Site Review Committee and the On-Site Reaffirmation Committee. An asterisk before the standard indicates that it will be reviewed by the On-Site Reaffirmation Committee even if the off-site review determines compliance.

A. Assessment of Compliance with Section 1: The Principle of Integrity

- 1.1 The institution operates with integrity in all matters. **(Integrity)**

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

- Compliance
 Non-Compliance

Comment:

B. Assessment of Compliance with Section 2: Core Requirements

- 2.1 The institution has degree-granting authority from the appropriate government agency or agencies. **(Degree-granting authority)**

- Compliance
 Non-Compliance

Comment:

Do we have documentation of THECB and/or Texas granting VC authority?

- 2.2 The institution has a governing board of at least five members that is the legal body with specific authority over the institution. The board is an active policy-making body for the institution and is ultimately responsible for ensuring that the financial resources of the institution are adequate to provide a sound educational program. The board is not controlled by a minority of board members or by organizations or interests separate from it. Both the presiding officer of the board and a majority of other voting members of the board are free of any contractual, employment, or personal or familial financial interest in the institution.

A military institution authorized and operated by the federal government to award degrees has a public board on which both the presiding officer and a majority of the other members are neither civilian employees of the military nor active/retired

military. The board has broad and significant influence upon the institution's programs and operations, plays an active role in policy-making, and ensures that the financial resources of the institution are used to provide a sound educational program. The board is not controlled by a minority of board members or by organizations or interests separate from the board except as specified by the authorizing legislation. Both the presiding officer of the board and a majority of other voting board members are free of any contractual, employment, or personal or familial financial interest in the institution. **(Governing board)**

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB
Should we add to Employee Handbook?

- 2.3** The institution has a chief executive officer whose primary responsibility is to the institution and who is not the presiding officer of the board. *(See the Commission policy "Core Requirement 2.3: Documenting an Alternate Approach.")* **(Chief executive officer)**

(Note: If an institution is part of a system and its chief executive officer is also the chief executive officer of the system, the institution must provide information requested in Commission policy "Core Requirement 2.3: Documenting an Alternate Approach." This information should be submitted as part of the Compliance Certification.)

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB

- 2.4** The institution has a clearly defined, comprehensive, and published mission statement that is specific to the institution and appropriate for higher education. The mission addresses teaching and learning and, where applicable, research and public service. **(Institutional mission)**

Compliance
 Non-Compliance

Comment:

Documentation of review of mission and any changes by committees and/or board

- 2.5** The institution engages in ongoing, integrated, and institution-wide research-based planning and evaluation processes that (1) incorporate a systematic review of institutional mission, goals, and outcomes; (2) result in continuing improvement

in institutional quality; and (3) demonstrate the institution is effectively accomplishing its mission. **(Institutional effectiveness)**

Compliance
 Non-Compliance

Comment:

Does VC process include:

- Review—documentation of reviews
- Continuous improvement
- Documentation that VC is effectively accomplishing state mission
- Clear, ongoing evidence (minutes, reports, etc.)

Can we develop and maintain a list of accomplishments tied to planning?

- Annual Summary
- Other

2.6 The institution is in operation and has students enrolled in degree programs. **(Continuous operation)**

Compliance
 Non-Compliance

Comment:

List/table of each degree program with brief enrollment history

2.7.1 The institution offers one or more degree programs based on at least 60 semester credit hours or the equivalent at the associate level; at least 120 semester credit hours or the equivalent at the baccalaureate level; or at least 30 semester credit hours or the equivalent at the post-baccalaureate, graduate, or professional level. If an institution uses a unit other than semester credit hours, it provides an explanation for the equivalency. The institution also provides a justification for all degrees that include fewer than the required number of semester credit hours or its equivalent unit. **(Program length)**

Compliance
 Non-Compliance

Comment:

Be explicit

2.7.2 The institution offers degree programs that embody a coherent course of study that is compatible with its stated mission and is based upon fields of study appropriate to higher education. **(Program content)**

Compliance
 Non-Compliance

Comment:

Include in response that distance learning has same policy/procedure and expectations as face to face

- *2.7.3** In each undergraduate degree program, the institution requires the successful completion of a general education component at the collegiate level that (1) is a substantial component of each undergraduate degree, (2) ensures breadth of knowledge, and (3) is based on a coherent rationale. For degree completion in associate programs, the component constitutes a minimum of 15 semester hours or the equivalent; for baccalaureate programs, a minimum of 30 semester hours or the equivalent. These credit hours are to be drawn from and include at least one course from each of the following areas: humanities/fine arts, social/behavioral sciences, and natural science/mathematics. The courses do not narrowly focus on those skills, techniques, and procedures specific to a particular occupation or profession. If an institution uses a unit other than semester credit hours, it provides an explanation for the equivalency. The institution also provides a justification if it allows for fewer than the required number of semester credit hours or its equivalent unit of general education courses. **(General education)**

Compliance
 Non-Compliance

Comment:

Look at SACS requirement "ensure breadth of knowledge and coherent rationale"
Speech is not a humanity
History cannot be the only Social/Behavioral Science

- 2.7.4** The institution provides instruction for all course work required for at least one degree program at each level at which it awards degrees. If the institution does not provide instruction for all such course work and (1) makes arrangements for some instruction to be provided by other accredited institutions or entities through contracts or consortia or (2) uses some other alternative approach to meeting this requirement, the alternative approach must be approved by the Commission on Colleges. In both cases, the institution demonstrates that it controls all aspects of its educational program. *(See the Commission policy "Core Requirement 2.7.4: Documenting an Alternate Approach.")* **(Course work for degrees)**
(Note: If an institution does not offer all course work for at least one degree at each degree level, it must request approval and provide documentation for an alternative approach that may include arrangements with other institutions. In such cases, the institution must submit information requested in Commission policy, "Core Requirement 2.7.4: Documenting an Alternate Approach." This information should be submitted as part of the Compliance Certification.)

Compliance
 Non-Compliance

Comment:

Close Review

- *2.8 The number of full-time faculty members is adequate to support the mission of the institution and to ensure the quality and integrity of each of its academic programs. **(Faculty)**

Compliance
 Non-Compliance

Comment:

Review and enhance faculty job descriptions

- 2.9 The institution, through ownership or formal arrangements or agreements, provides and supports student and faculty access and user privileges to adequate library collections and services and to other learning/information resources consistent with the degrees offered. Collections, resources, and services are sufficient to support all its educational, research, and public service programs. **(Learning resources and services)**

Compliance
 Non-Compliance

Comment:

Be clear and succinct
Provide evidence

- *2.10 The institution provides student support programs, services, and activities consistent with its mission that are intended to promote student learning and enhance the development of its students. **(Student support services)**

Compliance
 Non-Compliance

Comment:

Be clear and succinct
Provide evidence

- 2.11.1 The institution has a sound financial base and demonstrated financial stability to support the mission of the institution and the scope of its programs and services.

The member institution provides the following financial statements: (1) an institutional audit (or *Standard Review Report* issued in accordance with *Statements on Standards for Accounting and Review Services* issued by the AICPA for those institutions audited as part of a systemwide or statewide audit) and written institutional management letter for the most recent fiscal year prepared

by an independent certified public accountant and/or an appropriate governmental auditing agency employing the appropriate audit (or *Standard Review Report*) guide; (2) a statement of financial position of unrestricted net assets, exclusive of plant assets and plant-related debt, which represents the change in unrestricted net assets attributable to operations for the most recent year; and (3) an annual budget that is preceded by sound planning, is subject to sound fiscal procedures, and is approved by the governing board. **(Financial resources and stability)**

Compliance
 Non-Compliance

Comment:

Close review—thoroughly review SACS info—provide adequate examples

2.11.2 The institution has adequate physical resources to support the mission of the institution and the scope of its programs and services. **(Physical resources)**

Compliance
 Non-Compliance

Comment:

Close review—thoroughly review SACS info—provide adequate examples

2.12 The institution has developed an acceptable Quality Enhancement Plan (QEP) that includes an institutional process for identifying key issues emerging from institutional assessment and focuses on learning outcomes and/or the environment supporting student learning and accomplishing the mission of the institution. **(Quality Enhancement Plan)**

(Note: This requirement is not addressed by the institution in its Compliance Certification. Refer to the “Directions for Completing the Report of the Reaffirmation Committee.”)

Comment:

Follow SACS guidelines closely
Provide adequate evidence

C. Assessment of Compliance with Section 3: Comprehensive Standards

3.1.1 The mission statement is current and comprehensive, accurately guides the institution's operations, is periodically reviewed and updated, is approved by the governing board, and is communicated to the institution's constituencies. **(Mission).**

Compliance
 Non-Compliance

Comment:

Evidence of periodic review
Written policy/procedure that indicates a periodic review
Cited in minutes

3.2.1 The governing board of the institution is responsible for the selection and the periodic evaluation of the chief executive officer. **(CEO evaluation/selection)**

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB

3.2.2 The legal authority and operating control of the institution are clearly defined for the following areas within the institution's governance structure: **(Governing board control)**

3.2.2.1 the institution's mission

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB

3.2.2.2 the fiscal stability of the institution

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB

3.2.2.3 institutional policy

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB

- 3.2.3** The governing board has a policy addressing conflict of interest for its members. **(Board conflict of interest)**

Compliance
 Non-Compliance

Comment:

Must be published: ensure appropriate wording and details in TASB
Evidence of implementation (possible situations documented in minutes)
Completed forms by board members

- 3.2.4** The governing board is free from undue influence from political, religious, or other external bodies and protects the institution from such influence. **(External influence)**

Compliance
 Non-Compliance

Comment:

Any documented evidence???

- 3.2.5** The governing board has a policy whereby members can be dismissed only for appropriate reasons and by a fair process. **(Board dismissal)**

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB
Evidence of use or nonuse?

- 3.2.6** There is a clear and appropriate distinction, in writing and practice, between the policy-making functions of the governing board and the responsibility of the administration and faculty to administer and implement policy. **(Board/administration distinction)**

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB
Board responsibilities are clear in policy—they approve policy not implement
Job descriptions CEO, Administration, Staff, Faculty, and others indicate they follow policy—not make it

3.2.7 The institution has a clearly defined and published organizational structure that delineates responsibility for the administration of policies. **(Organizational structure)**

Compliance
 Non-Compliance

Comment:

Easy link to clear and thorough organizational chart (screen shots)
Organization chart needs to be easy to find in TASB, Employee Handbook, Website, published or available to the public (easy to get to/ internet not intranet)

***3.2.8** The institution has qualified administrative and academic officers with the experience and competence to lead the institution. **(Qualified administrative/academic officers)**

Compliance
 Non-Compliance

Comment:

Be clear, detailed, and specific when creating chart

3.2.9 The institution publishes policies regarding appointment, employment, and evaluation of all personnel. **(Personnel appointment)**

Compliance
 Non-Compliance

Comment:

Ensure appropriate wording and detail in TASB
Evidence in Employee Handbook
**any evidence cited in response should be easy for the reviewer to find and check

3.2.10 The institution periodically evaluates the effectiveness of its administrators. **(Administrative staff evaluations)**

Compliance
 Non-Compliance

Comment:

Evidence of policy
Evidence of actual reviews

3.2.11 The institution's chief executive officer has ultimate responsibility for, and exercises appropriate administrative and fiscal control over, the institution's intercollegiate athletics program. **(Control of intercollegiate athletics)**

Compliance
 Non-Compliance

Comment:

CEO job description
Other p/p

3.2.12 The institution demonstrates that its chief executive officer controls the institution's fund-raising activities. **(Fund-raising activities).**

Compliance
 Non-Compliance

Comment:

CEO job description
Other p/p

3.2.13 For any entity organized separately from the institution and formed primarily for the purpose of supporting the institution or its programs: (1) the legal authority and operating control of the institution is clearly defined with respect to that entity; (2) the relationship of that entity to the institution and the extent of any liability arising out of that relationship is clearly described in a formal, written manner; and (3) the institution demonstrates that (a) the chief executive officer controls any fund-raising activities of that entity or (b) the fund-raising activities of that entity are defined in a formal, written manner which assures that those activities further the mission of the institution. **(Institution-related entities)**

Compliance
 Non-Compliance

Comment:

Foundation memorandum of understanding with VC
Foundation constitution
Exec. Director job description

3.2.14 The institution's policies are clear concerning ownership of materials, compensation, copyright issues, and the use of revenue derived from the creation and production of all intellectual property. These policies apply to students, faculty, and staff. **(Intellectual property rights)**

Compliance
 Non-Compliance

Comment:

Is policy published and easily accessible?
Does policy address students? Is it easily accessible to students?
Examples of policy in practice?
Evidence of development of policy.
Does policy indicate review process? Are compensation details explicit?
Minutes as evidence of policy review?

3.3.1 The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in each of the following areas (**Institutional Effectiveness**):

***3.3.1.1** educational programs, to include student learning outcomes

Compliance
 Non-Compliance

Comment:

Evidence of data driven improvements

3.3.1.2 administrative support services

Compliance
 Non-Compliance

Comment:

3.3.1.3 academic and student support services

Compliance
 Non-Compliance

Comment:

3.3.1.4 research within its mission, if appropriate

Compliance
 Non-Compliance

Comment:

3.3.1.5 community/public service within its mission, if appropriate

Compliance

Non-Compliance

Comment:

- 3.3.2** The institution has developed a Quality Enhancement Plan that (1) demonstrates institutional capability for the initiation, implementation, and completion of the QEP; (2) includes broad-based involvement of institutional constituencies in the development and proposed implementation of the QEP; and (3) identifies goals and a plan to assess their achievement. **(Quality Enhancement Plan)**
(Note: This requirement is not addressed by the institution in its Compliance Certification.)

Compliance
 Non-Compliance

Comment:

- 3.4.1** The institution demonstrates that each educational program for which academic credit is awarded is approved by the faculty and the administration. **(Academic program approval)**

Compliance
 Non-Compliance

Comment:

Evidence/documentation of procedures
Evidence/minutes of actions/activity
Table indicating degree, date approved, board minutes

- 3.4.2** The institution's continuing education, outreach, and service programs are consistent with the institution's mission. **(Continuing education/service programs)**

Compliance
 Non-Compliance

Comment:

- *3.4.3** The institution publishes admissions policies that are consistent with its mission. **(Admissions policies)**

Compliance
 Non-Compliance

Comment:

Easy to find/clear

- 3.4.4** The institution publishes policies that include criteria for evaluating, awarding, and accepting credit for transfer, experiential learning, credit by examination, advanced placement, and professional certificates that is consistent with its mission and ensures that course work and learning outcomes are at the collegiate level and comparable to the institution's own degree programs. The institution assumes responsibility for the academic quality of any course work or credit recorded on the institution's transcript. (See Commission policy "Agreements Involving Joint and Dual Academic Awards: Policy and Procedures.") **(Acceptance of academic credit)**

(Note: Although not listed as a reference in the Principles of Accreditation, see also the Commission policy "The Quality and Integrity of Undergraduate Degrees."

Compliance
 Non-Compliance

Comment:

Fully explain policy, procedure, process, practice
Note faculty involvement in review
Sample transcripts

- 3.4.5** The institution publishes academic policies that adhere to principles of good educational practice. These policies are disseminated to students, faculty, and other interested parties through publications that accurately represent the programs and services of the institution. **(Academic policies)**

Compliance
 Non-Compliance

Comment:

Make sure easy, clear access to catalog, p/p, handbooks, etc.

- 3.4.6** The institution employs sound and acceptable practices for determining the amount and level of credit awarded for courses, regardless of format or mode of delivery. **(Practices for awarding credit)**

Compliance
 Non-Compliance

Comment:

Fully detail and explain especially in regard to format or delivery method

- 3.4.7** The institution ensures the quality of educational programs and courses offered through consortia relationships or contractual agreements, ensures ongoing compliance with the *Principles* and periodically evaluates the consortial relationship and/or agreement against the mission of the institution. (See the

Commission policy "Agreements Involving Joint and Dual Academic Awards: Policy and Procedures.") (**Consortia relationships/contractual agreements**)

Compliance
 Non-Compliance

Comment:

We need to look at this

- 3.4.8** The institution awards academic credit for course work taken on a noncredit basis only when there is documentation that the noncredit course work is equivalent to a designated credit experience. (**Noncredit to credit**)

Compliance
 Non-Compliance

Comment:

Fully explain p/p
Evidence of use

- 3.4.9** The institution provides appropriate academic support services. (**Academic support services**)

Compliance
 Non-Compliance

Comment:

In detail, ensure evidence of support services to distance education students (surveys, other data)

- 3.4.10** The institution places primary responsibility for the content, quality, and effectiveness of its curriculum with its faculty. (**Responsibility for curriculum**)

Compliance
 Non-Compliance

Comment:

Fully detail p/p including academic council involvement, program review process
Examples of or evidence of use (minutes)

- *3.4.11** For each major in a degree program, the institution assigns responsibility for program coordination, as well as for curriculum development and review, to persons academically qualified in the field. In those degree programs for which

the institution does not identify a major, this requirement applies to a curricular area or concentration. **(Academic program coordination)**

Compliance
 Non-Compliance

Comment:

Be clear and specific

3.4.12 The institution's use of technology enhances student learning and is appropriate for meeting the objectives of its programs. Students have access to and training in the use of technology. **(Technology use)**

Compliance
 Non-Compliance

Comment:

Evidence of student orientation/training to use technology
PD for faculty and staff
Technology committee meeting minutes

3.5.1 The institution identifies college-level general education competencies and the extent to which students have attained them. **(General education competencies)**

Compliance
 Non-Compliance

Comment:

3.5.2 At least 25 percent of the credit hours required for the degree are earned through instruction offered by the institution awarding the degree. *(See the Commission policy "Agreements Involving Joint and Dual Academic Awards: Policy and Procedures.")* **(Institutional credits for a degree).**

Compliance
 Non-Compliance

Comment:

3.5.3 The institution publishes requirements for its undergraduate programs, including its general education components. These requirements conform to commonly accepted standards and practices for degree programs. *(See the Commission policy "The Quality and Integrity of Undergraduate Degrees.")* **(Undergraduate program requirements)**

Compliance
 Non-Compliance

Comment:

- 3.5.4** At least 25 percent of the course hours in each major at the baccalaureate level are taught by faculty members holding an appropriate terminal degree—usually the earned doctorate or the equivalent of the terminal degree. **(Terminal degrees of faculty)**

Compliance
 Non-Compliance

Comment:

- 3.6.1** The institution's post-baccalaureate professional degree programs, and its master's and doctoral degree programs, are progressively more advanced in academic content than its undergraduate programs. **(Post-baccalaureate program rigor)**

Compliance
 Non-Compliance

Comment:

- 3.6.2** The institution structures its graduate curricula (1) to include knowledge of the literature of the discipline and (2) to ensure ongoing student engagement in research and/or appropriate professional practice and training experiences. **(Graduate curriculum)**

Compliance
 Non-Compliance

Comment:

- 3.6.3** At least one-third of credits toward a graduate or a post-baccalaureate professional degree are earned through instruction offered by the institution awarding the degree. *(See the Commission policy "Agreements Involving Joint and Dual Academic Awards: Policy and Procedures.")* **(Institutional credits for a degree)**

Compliance
 Non-Compliance

Comment:

- 3.6.4** The institution defines and publishes requirements for its graduate and post-graduate professional programs. These requirements conform to commonly accepted standards and practices for degree programs. **(Post-baccalaureate program requirements)**

Compliance
 Non-Compliance

Comment:

- 3.7.1** The institution employs competent faculty members qualified to accomplish the mission and goals of the institution. When determining acceptable qualifications of its faculty, an institution gives primary consideration to the highest earned degree in the discipline. The institution also considers competence, effectiveness, and capacity, including, as appropriate, undergraduate and graduate degrees, related work experiences in the field, professional licensure and certifications, honors and awards, continuous documented excellence in teaching, or other demonstrated competencies and achievements that contribute to effective teaching and student learning outcomes. For all cases, the institution is responsible for justifying and documenting the qualifications of its faculty. (See *Commission guidelines "Faculty Credentials."*) **(Faculty competence)**

Compliance
 Non-Compliance

Comment:

- 3.7.2** The institution regularly evaluates the effectiveness of each faculty member in accord with published criteria, regardless of contractual or tenured status. **(Faculty evaluation)**

Compliance
 Non-Compliance

Comment:

- 3.7.3** The institution provides evidence of ongoing professional development of faculty as teachers, scholars, and practitioners. **(Faculty development)**

Compliance
 Non-Compliance

Comment:

- 3.7.4** The institution ensures adequate procedures for safeguarding and protecting academic freedom. **(Academic freedom)**

Compliance
 Non-Compliance

Comment:

- 3.7.5** The institution publishes policies on the responsibility and authority of faculty in academic and governance matters. **(Faculty role in governance)**

Compliance
 Non-Compliance

Comment:

- 3.8.1** The institution provides facilities and learning/information resources that are appropriate to support its teaching, research, and service mission. **(Learning/information resources)**

Compliance
 Non-Compliance

Comment:

- 3.8.2** The institution ensures that users have access to regular and timely instruction in the use of the library and other learning/information resources. **(Instruction of library use)**

Compliance
 Non-Compliance

Comment:

- 3.8.3** The institution provides a sufficient number of qualified staff—with appropriate education or experiences in library and/or other learning/information resources—to accomplish the mission of the institution. **(Qualified staff)**

Compliance
 Non-Compliance

Comment:

- 3.9.1** The institution publishes a clear and appropriate statement of student rights and responsibilities and disseminates the statement to the campus community. **(Student rights)**

Compliance
 Non-Compliance

Comment:

- 3.9.2** The institution protects the security, confidentiality, and integrity of its student records and maintains security measures to protect and back up data. **(Student records).**

Compliance
 Non-Compliance

Comment:

3.9.3 The institution provides a sufficient number of qualified staff—with appropriate education or experience in the student affairs area—to accomplish the mission of the institution. **(Qualified staff)**

Compliance
 Non-Compliance

Comment:

3.10.1 The institution's recent financial history demonstrates financial stability. **(Financial stability)**

Compliance
 Non-Compliance

Comment:

***3.10.2** The institution audits financial aid programs as required by federal and state regulations. **(Financial aid audits)**

Compliance
 Non-Compliance

Comment:

3.10.3 The institution exercises appropriate control over all its financial resources. **(Control of finances)**

Compliance
 Non-Compliance

Comment:

3.10.4 The institution maintains financial control over externally funded or sponsored research and programs. **(Control of sponsored research/external funds)**

Compliance
 Non-Compliance

Comment:

3.11.1 The institution exercises appropriate control over all its physical resources. **(Control of physical resources)**

Compliance
 Non-Compliance

Comment:

3.11.2 The institution takes reasonable steps to provide a healthy, safe, and secure environment for all members of the campus community. **(Institutional environment)**

Compliance
 Non-Compliance

Comment:

***3.11.3** The institution operates and maintains physical facilities, both on and off campus, that appropriately serve the needs of the institution's educational programs, support services, and other mission-related activities. **(Physical facilities)**

Compliance
 Non-Compliance

Comment:

3.12.1 The institution notifies the Commission of changes in accordance with the Commission's substantive change policy and, when required, seeks approval prior to the initiation of changes. *(See the Commission policy "Substantive Changes for Accredited Institutions.")* **(Substantive change)**

Compliance
 Non-Compliance

Comment:

3.13.1 The institution complies with the policies of the Commission on Colleges. **(Policy compliance)**

(Note: Institutions are responsible for reviewing the following Commission policies and providing evidence of compliance with those that are applicable. Those that have asterisks are policies that include a federal mandate.)

***3.13.1. "Accrediting Decisions of Other Agencies"**

Applicable Policy Statement. Any institution seeking or holding accreditation from more than one U.S. Department of Education recognized accrediting body must describe itself in identical terms to each recognized accrediting body with regard to purpose, governance, programs, degrees, diplomas, certificates, personnel, finances, and constituencies, and must keep each institutional accrediting body apprised of any change in its status with one or another accrediting body.

Documentation: The institution should (1) list federally recognized agencies that currently accredit the institution or any of its programs, (2) provide the date of the most recent review by each agency and indicate if negative action was taken by the agency and the reason for such action, (3) provide copies of statements used to describe itself for each of the accrediting bodies, (4) indicate any agency that has terminated accreditation, the date, and the reason for termination, and (5) indicate the date and reason for the institution voluntarily withdrawing accreditation with any of the agencies.

Compliance Non-Compliance Not applicable

Comment:

3.13.2 “Agreements Involving Joint and Dual Academic Awards: Policy and Procedures”

Applicable Policy Statement. Member institutions are responsible for notifying and providing SACSCOC with signed final copies of agreements governing their collaborative academic arrangements (as defined in this policy). These arrangements must address the requirements set forth in the collaborative academic arrangements policy and procedures. For all such arrangements, SACSCOC-accredited institutions assume responsibility for (1) the integrity of the collaborative academic arrangements, (2) the quality of credits recorded on their transcripts, and (3) compliance with accreditation requirements.

Documentation: The institution should provide evidence that it has reported to the Commission all collaborative academic arrangements (as defined in this policy) that included signed final copies of the agreements. In addition, the institution should integrate into the Compliance Certification a discussion and determination of compliance with all standards applicable to the provisions of the agreements.

Compliance Non-Compliance Not applicable

Comment:

*3.13.3 “Complaint Procedures Against the Commission or Its Accredited Institutions”

Applicable Policy Statement. Each institution is required to have in place student complaint policies and procedures that are reasonable, fairly administered, and well-publicized. (See *FR 4.5*). The Commission also requires, in accord with federal regulations, that each institution maintains a record of complaints received by the institution. This record is made available to the Commission upon request. This record will be reviewed and evaluated by the Commission as part of the institution’s decennial evaluation.

Documentation: When addressing this policy statement, the institution should provide information to the Commission describing how the institution maintains its record and also include the following: (1) individuals/offices responsible for the maintenance of the record(s), (2) elements of a complaint review that are included in the record, and (3) where the record(s) is located (centralized or decentralized). The record itself will be reviewed during the on-site evaluation of the institution.

Compliance Non-Compliance Not applicable

Comment:

3.13.4 “Reaffirmation of Accreditation and Subsequent Reports”

***3.13.4.a. Applicable Policy Statement.** An institution includes a review of its distance learning programs in the Compliance Certification.

Documentation: In order to be in compliance with this policy, the institution must have incorporated an assessment of its compliance with standards that apply to its distance and correspondence education programs and courses.

Compliance Non-Compliance Not applicable

Comment:

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

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

Compliance Non-Compliance Not applicable

Comment:

3.13.5 “Separate Accreditation for Units of a Member Institution”

***3.13.5.a. Applicable Policy Statement.** .All branch campuses related to the parent campus through corporate or administrative control (1) include the name of the parent campus and make it clear that its accreditation is dependent on the continued accreditation of the parent campus and (2) are evaluated during reviews for institutions seeking candidacy, initial membership, or reaffirmation of accreditation. All other extended units under the accreditation of the parent campus are also evaluated during such reviews.

Documentation: For institutions with branch campuses: (1) The name of each branch campus must include the name of the parent campus—the SACSCOC accredited entity. The institution should provide evidence of this for each of its branch campuses. (2) The institution should incorporate the review of its branch campuses, as well as other extended units under the parent campus, into its comprehensive self-assessment and its determination of compliance with the standards, and indicate the procedure for doing so.

Compliance Non-Compliance Not applicable

Comment:

3.13.5.b. Applicable Policy Statement. If the Commission on Colleges determines that an extended unit is autonomous to the extent that the control over that unit by the parent or its board is significantly impaired, the Commission may direct that the extended unit seek to become a separately accredited institution. A unit which seeks separate accreditation should bear a different name from that of the parent. A unit which is located

in a state or country outside the geographic jurisdiction of the Southern Association of Colleges and Schools and which the Commission determines should be separately accredited or the institution requests to be separately accredited, applies for separate accreditation from the regional accrediting association that accredits colleges in that state or country

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

Compliance Non-Compliance Not applicable

Comment:

3.14.1 A member or candidate institution represents its accredited status accurately and publishes the name, address, and telephone number of the Commission in accordance with Commission requirements and federal policy. **(Publication of accreditation status)**

Compliance
 Non-Compliance

Comment:

D. Assessment of Compliance with Section 4: Federal Requirements

- *4.1** The institution evaluates success with respect to student achievement consistent with its mission. Criteria may include: enrollment data; retention, graduation, course completion, and job placement rates; state licensing examinations, student portfolios; or other means of demonstrating achievement of goals. **(Student achievement)**

Compliance
 Non-Compliance

Comment:

- *4.2** The institution's curriculum is directly related and appropriate to the mission and goals of the institution and the diplomas, certificates, or degrees awarded. **(Program curriculum)**

Compliance
 Non-Compliance

Comment:

- *4.3** The institution makes available to students and the public current academic calendars, grading policies, and refund policies. **(Publication of policies)**

Compliance
 Non-Compliance

Comment:

- *4.4** Program length is appropriate for each of the institution's educational programs. **(Program length)**

Compliance
 Non-Compliance

Comment:

- *4.5** The institution has adequate procedures for addressing written student complaints and is responsible for demonstrating that it follows those procedures when resolving student complaints. *(See the Commission policy "Complaint Procedures against the Commission or its Accredited Institutions.")* **(Student complaints)**

Compliance
 Non-Compliance

Comment:

***4.6** Recruitment materials and presentations accurately represent the institution's practices and policies. **(Recruitment materials)**

Compliance
 Non-Compliance

Comment:

***4.7** The institution is in compliance with its program responsibilities under Title IV of the most recent Higher Education Act as amended. (In reviewing the institution's compliance with these program responsibilities, the Commission relies on documentation forwarded to it by the U.S. Department of Education.) **(Title IV program responsibilities)**

Compliance
 Non-Compliance

Comment:

***4.8** An institution that offers distance or correspondence education documents each of the following: **(Distance and correspondence education)**

4.8.1 demonstrates that the student who registers in a distance or correspondence education course or program is the same student who participates in and completes the course or program and receives the credit by verifying the identity of a student who participates in class or coursework by using, at the option of the institution, methods such as (a) a secure login and pass code, (b) proctored examinations, or (c) new or other technologies and practices that are effective in verifying student identification.

Compliance
 Non-Compliance

Comment:

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

Compliance
 Non-Compliance

Comment:

4.8.3 has a written procedure distributed at the time of registration or enrollment that notifies students of any projected additional student charges associated with verification of student identity.

Compliance

Non-Compliance

Comment:

- *4.9** The institution has policies and procedures for determining the credit hours awarded for courses and programs that conform to commonly accepted practices in higher education and to Commission policy. (See the Commission policy "Credit Hours.") **(Definition of credit hours)**

Compliance

Non-Compliance

Comment:

E. Additional observations regarding strengths and weaknesses of the institution. (optional).

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| Part III. Assessment of the Quality Enhancement Plan |
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To be completed by the On-Site Reaffirmation Committee.

A. Brief description of the institution's Quality Enhancement Plan

B. Analysis of the Acceptability of the Quality Enhancement Plan

1. **An Institutional Process.** *The institution uses an institutional process for identifying key issues emerging from institutional assessment.*
2. **Focus of the Plan.** *The institution identifies a significant issue that (1) focuses on learning outcomes and/or the environment supporting student learning and (2) accomplishes the mission of the institution.*
3. **Institutional Capability for the Initiation, Implementation, and Completion of the Plan.** *The institution provides evidence that it has sufficient resources to initiate, implement, sustain, and complete the QEP.*
4. **Broad-based Involvement of Institutional Constituencies.** *The institution demonstrates the involvement of its constituencies in the development and proposed implementation of the Plan.*
5. **Assessment of the Plan.** *The institution identifies goals and a plan to assess the achievement of those goals.*

C. Analysis and Comments for Strengthening the QEP

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| Part IV. Third-Party Comments |
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To be completed by the On-Site Reaffirmation Committee.

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

The Committee should check one of the following:

_____ No Third-Party Comments submitted.

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

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

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

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

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

APPENDIX A

| Roster of the Off-Site Reaffirmation Committee | Roster of the On-Site Reaffirmation Committee |
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(Refer to "Directions for Completion of the Report of the Reaffirmation Committee.")

APPENDIX B

Off-Campus Sites or Distance Learning Programs Reviewed

(Refer to "Directions for Completion of the Report of the Reaffirmation Committee.")

APPENDIX C

List of Recommendations Cited in the Report of the Reaffirmation Committee *(Refer to "Directions for Completion of the Report of the Reaffirmation Committee.")*