

**DEAC CHAIR’S REPORT TEMPLATE**

**for Deferral, Show Cause, and Special Visits**

Background

The Distance Education Accrediting Commission’s accreditation process is grounded on the fundamental principle of peer review that enables faculty and administrative staff from within higher education to make recommendations essential to ensuring the quality of learning and institutional operations for all students. The process is guided by transparent standards that are established collaboratively by professional peers and member institutions.

**Note:** This Chair’s Report Template is for use in reviewing the results of a deferral, show cause, or special visit.

The Commission may take one of four courses of action when evaluating a candidate for accreditation or reaccreditation. It may grant accreditation, defer accreditation, require an institution to show cause as to why its application accreditation should not be denied, or deny accreditation.

**Deferral**: An institution’s accreditation may be deferred by the Commission, pending the receipt of additional information and/or results of a follow-up on-site site evaluation.

**Show Cause:** In cases where the Commission does not believe that an institution has demonstrated compliance with accreditation standards and other requirements, the Commission will direct the institution to Show Cause as to why its application for accreditation or reaccreditation should not be denied. In certain situations, where a large number of accreditation standards may be implicated by the Commission’s identified concerns or where the Commission identifies systemic problems, the show cause directive may require the institution to submit to a comprehensive re-evaluation. This may include a requirement that the institution submit an updated application for accreditation in order to update and confirm eligibility status and an updated SER, as well as a new curricular review and on-site visit.

**Special Visit:** Upon review of the application for accreditation or reaccreditation of an institution that has previously received a show cause directive, a decision is made on the institution’s compliance with the accreditation standards or requirements noted in the directive. The Commission may continue the show cause directive and require the submission of additional information or further reports from the institution and/or a special visit in accordance with Section X.A.

The Commission may also require a special visit due to unusual circumstances or failure by the institution to meet its obligations to the Commission. The Commission’s requirement for a special visit may be triggered by:

* a serious or an unusually large number of student or other complaints e.g., “whistle-blower” complaints;
* state or federal investigations or legal action taken against an institution;
* an institution’s failure to continue to comply with a condition of accreditation;
* reported negative financial conditions or events;
* a show cause directive issued by the Commission;
* governmental complaints against the institution; or
* similar serious concerns.

The on-site visit provides an opportunity for evaluators to meet with key staff members, faculty/instructors, principal managers, outside accountants, governing board members, and advisory council members. The evaluators verify whether or not the institution has satisfied the Commission’s requirements enumerated in a Deferral Notice, Show Cause Directive, or Special Visit Directive. In all cases, the Commission will have identified the accreditation standards which the institution will need to demonstrate compliance.

The on-site evaluators’ reports inform the Commission whether the institution meets, partially meets, or does not meet each of the DEAC accreditation standards and core components. This Chair’s Report also reports whether or not the institution has resolved the issue(s) identified for a given standard, or if additional requires actions are needed to demonstrate compliance.

Approximately four to six weeks after the on-site visit, the Chair’s Report is provided to the institution for response. Both the Chair’s Report and the institution’s response are submitted to the Commission for review prior to final decision making.

The Chair of the on-site team is responsible for guiding the completion of the on-site evaluation in accordance with the Commission’s processes and procedures and ensures that evaluators complete their tasks during the on-site evaluation.

**Self-Evaluation Report** **(SER**)
The Self-Evaluation Report tells a story about the institution, beginning with its history and mission and then focusing on its evolution and future. Institutions have the opportunity to present their passion for serving students and providing educational options that will shape future generations. Institutions craft their story using the Self-Evaluation Report template as a guide while demonstrating how their policies and procedures meet DEAC’s accreditation standards.

# Instructions

The Chair receives independent reports from each on-site team member two weeks after the on-site evaluation. It is the Chair’s responsibility to review and assess the accuracy of the individual team members’ reports and, by completing the following report template, to present an overall determination of whether the institution adequately demonstrates that it meets DEAC’s accreditation standards.

Findings guidelines:

* **Meets Standard:** The institution demonstrates compliance with the intent of the accreditation standard or core component.
* **Partially Meets Standard:** The institution was able to demonstrate compliance with some, but not all, of the elements contained in the accreditation standard or core component.
* **Does Not Meet Standard:** The institution was unable to demonstrate compliance with a majority of the elements contained in the accreditation standard or core component.

**Note:** The role of the evaluation team and the Chair during Deferral, Show Cause, and Special Visits is twofold:

* To review whether or not the institution has provided sufficient evidence of compliance with the Commission’s required actions, AND
* To determine whether the institution adequately demonstrates that it comprehensively meets DEAC’s accreditation standards. The on-site team’s analysis of the institution is not limited to the issues originally noted by the Commission. The institution must demonstrate compliance with all DEAC accreditation standards.

The Chair should provide clear and concise descriptions within the “Comments” section of the report to support each determination that a standard or core component is met, partially met, or not met. If an institution meets the accreditation standard, the Chair may want to consider highlighting within the Comments section the processes and procedures the institution followed that enabled it to demonstrate compliance. If an institution partially meets or does not meet a standard, the Chair needs to adequately describe why the evaluation team reached this decision and refer, as appropriate, to narrative sections and exhibits within the SER that support the determination.

The Chair must also indicate the required actions necessary for the institution to demonstrate compliance with the partially met or unmet accreditation standard. Each required action must be tied back to an accreditation standard or core component.

For required actions, the Chair should begin each statement with, “[Insert Name of Institution] needs to [insert the action necessary by the institution to demonstrate compliance with the accreditation standard.]”

The Chair must further indicate if the issue(s) identified by the Commission in the Deferral Notice, Show Cause Directive, or Special Visit Directive has been resolved or if additional required actions are needed. **If the issue(s) of concern raised by the Commission are resolved**, explicitly explain how the evaluation team reached this conclusion and describe the evidence the institution provided during the review. **If required actions are still needed** to demonstrate compliance with the Standards identified by the Commission, explicitly state these requirements and clearly identify the evidence that the institution needs to provide in response to the Chair’s Report.

As part of the peer review process, it is important that institutions receive suggestions for improving their educational offerings and support services. The accreditation process allows the institution to benefit from an external review and perspective. The Chair is encouraged to provide suggestions within the report. Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

For suggestions, the Chair should begin each statement with, “[Insert Name of Institution] may want to consider [insert the recommendation for improvement.]”

The Chair may not agree with a determination made by another on-site team member. It is the Chair’s responsibility to review the merits and evidence presented for each determination. It is within the Chair’s discretion to change a determination as necessary based on the institution’s response and evidence presented during the on-site visit.

**Report Submission:** The Chair emails the completed report to the DEAC director of accreditation four weeks after the on-site visit. Once all information is received, DEAC notifies the Chair to appropriately dispose of all institutional materials.

Helpful Hints

* The Chair’s Report should be objectively written in third person, narrative format using declarative sentences and simple verbs. The report should avoid broad generalities and speculative views.
* The Chair’s Report represents an accurate, concise, factual, and thorough presentation of the team’s findings during the on-site visit.
* When making an overall determination whether the institution meets, partially meets, or does not meet accreditation standards, the Chair should include evidence of documents reviewed on-site or analyzed in the Self-Evaluation Report and Exhibits that led to the finding. Include specific examples.
* The Chair’s Report documents attributes and deficiencies using language found in the accreditation standards and core components. All deficiencies must be documented.
* The Chair’s Report should not require an institution to implement a new program or procedure in order to demonstrate compliance with a partially met or unmet accreditation standard. The Chair’s Report states the required action necessary to provide evidence or demonstrate compliance. The institution bears responsibility for demonstrating compliance with DEAC’s accreditation standards.
* The Chair’s Report accurately presents comments, required actions, and suggestions using direct quotations, references, data, and examples from team members’ reports.
* The Chair’s Report should not reference individual team members’ reports or contain supporting exhibits.
* The Chair’s Report does not make recommendations to the Commission concerning the overall accreditation of the institution.

# DEAC Chair’s Report – Deferral, Show Cause, or Special Visit (Confidential)

Name of Institution: Name of Institution

Date of On-site Visit: Date of On-site Visit

Submitted By: Evaluator Name

Date of Report: Date of Report

# On-site Team Members

Chair

Name
Title
Institution or Affiliation

Education Standards Evaluator

Name
Title
Institution or Affiliation

Business Standards Evaluator

Name
Title
Institution or Affiliation

Subject Specialist

Name
Title
Institution or Affiliation

Subject Specialist

Name
Title
Institution or Affiliation

DEAC Staff Observer

Name
Title
Institution or Affiliation

Summary of Findings

**Standard I: Institutional Mission**

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| --- | --- |
| Core Components | Finding |
| 1. Description of the Mission
 | Choose a finding. |
| 1. Review and Publication of the Mission
 | Choose a finding. |
| 1. Information on Achievement of the Mission
 | Choose a finding. |

**Standard II: Institutional Effectiveness and Strategic Planning**

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| --- | --- |
| Core Components | Finding |
| 1. Institutional Effectiveness Planning
 | Choose a finding. |
| 1. Strategic Planning
 | Choose a finding. |

**Standard III: Program Outcomes, Curricula, and Materials**

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| --- | --- |
| Core Components | Finding |
| 1. Description of Program Outcomes
 | Choose a finding. |
| 1. Appropriate Program Outcomes
 | Choose a finding. |
| 1. Curricula Delivery
 | Choose a finding. |
| 1. Comprehensive Curricula and Instructional Materials
 | Choose a finding. |
| 1. Curricula Development and Delivery
 | Choose a finding. |
| 1. Academic Units of Measurement
 | Choose a finding. |
| 1. Educational Media and Learning Resources
 | Choose a finding. |
| 1. Examinations and Other Assessments
 | Choose a finding. |
| 1. Student Integrity and Academic Honesty
 | Choose a finding. |
| 1. Institutional Review Board
 | Choose a finding. |

**Standard IV: Educational and Student Support Services**

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| Core Components | Finding |
| 1. Appropriate Technology
 | Choose a finding. |
| 1. Student Inquiries and Submissions
 | Choose a finding. |
| 1. Individual Differences
 | Choose a finding. |
| 1. Encouragement of Students
 | Choose a finding. |
| 1. Satisfactory Academic Progress
 | Choose a finding. |
| 1. Grading Policies
 | Choose a finding. |
| 1. Student Records
 | Choose a finding. |
| 1. Confidentiality and Privacy
 | Choose a finding. |
| 1. Student Support Services
 | Choose a finding. |
| 1. Student Complaints
 | Choose a finding. |

**Standard V: Student Achievement and Satisfaction**

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| --- | --- |
| Core Components | Findings |
| 1. Student Achievement
 | Choose a finding. |
| 1. Student Satisfaction
 | Choose a finding. |
| 1. Performance Disclosures
 | Choose a finding. |

 **Standard VI: Academic Leadership and Faculty Qualifications**

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| Core Components | Findings |
| 1. Academic Leadership
 | Choose a finding. |
| 1. Chief Academic Officer (CAO) or Education Director
 | Choose a finding. |
| 1. Instructors, Faculty, and Staff
 | Choose a finding. |
| 1. Professional Growth
 | Choose a finding. |

**Standard VII: Advertising, Promotional Literature, and Recruitment Personnel**

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| Core Components | Findings |
| 1. Advertising and Promotion
 | Choose a finding. |
| 1. Institution and Course Accredited-Status Recognition
 | Choose a finding. |
| 1. Student Recruitment
 | Choose a finding. |

**Standard VIII: Admission Practices and Enrollment Agreements**

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| --- | --- |
| Core Components | Findings |
| 1. Admissions Disclosures
 | Choose a finding. |
| 1. Student Identity Verification
 | Choose a finding. |
| 1. Compulsory Age Students
 | Choose a finding. |
| 1. Admissions Criteria
 | Choose a finding. |
| 1. Admission Acceptance and Denial
 | Choose a finding. |
| 1. Transfer Credits
 | Choose a finding. |
| 1. Enrollment Agreements
 | Choose a finding. |

**Standard IX: Financial Disclosures, Cancellations, and Refund Policies**

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| Core Components | Findings |
| 1. Financial Disclosures
 | Choose a finding. |
| 1. Cancellations
 | Choose a finding. |
| 1. Refunds
 | Choose a finding. |
| 1. Discounts
 | Choose a finding. |
| 1. Collections
 | Choose a finding. |

**Standard X: Institutional Governance**

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| Core Components | Findings |
| 1. Owners, Governing Board Members, Officials, and Administrators
 | Choose a finding. |
| 1. Reputation of Institution, Owners, Governing Board Members, Officials, and Administrators
 | Choose a finding. |
| 1. Succession Plan
 | Choose a finding. |

**Standard XI: Financial Responsibility**

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| Core Components | Findings |
| 1. Financial Practices
 | Choose a finding. |
| 1. Financial Management
 | Choose a finding. |
| 1. Financial Stability and Sustainability
 | Choose a finding. |
| 1. Financial Reporting
 | Choose a finding. |
| 1. Demonstrated Operations
 | Choose a finding. |

**Standard XII: Facilities, Equipment, Supplies, Record Protection and Retention**

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| Core Components | Findings |
| 1. Facilities, Equipment, and Supplies
 | Choose a finding. |
| 1. In-Residence Component (outside scope of this review)
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| 1. Record Protection
 | Choose a finding. |
| 1. Record Retention
 | Choose a finding. |
| 1. State Authorization
 | Choose a finding. |

# On-site Visit Background and Summary

**Purpose of the On-site Visit (check one):**

[ ]  Deferral Visit [ ]  Show Cause Visit [ ]  Special Visit

 **Visit Summary:** Provide an overview of the on-site visit including how well the institution was prepared.
**Self-Evaluation Report and Exhibits Structure and Format:** Provide the applicant institution with feedback on the general structure, content, and format of its Self-Evaluation Report and Exhibits.

**Institutional Overview:** Provide an overview of the applicant institution, including founding, organizational structure, target student population, legal form and governance, and status of state authorization.

**Program List:** Provide a list of all programs offered by the institution.

Accreditation Standards Findings

## Standard I: Institutional Mission

1. **Description of the Mission:** The institution’s mission communicates its purpose and its commitment to providing quality distance educational offerings appropriate to the level of study offered. The mission establishes the institution’s identity within the educational community and guides the development of its educational offerings.

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| **Standard I.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Review and Publication of the Mission:** The institution’s leadership, faculty, staff, administrators, and other stakeholders regularly review the mission to assure continued institutional quality and viability. The published mission statement is readily accessible to students, faculty, staff, other stakeholders, and the public.

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| **Standard I.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Information on Achievement of the Mission:** The institution identifies key indicators it uses to demonstrate that it is effectively carrying out its mission. The institution documents the achievement of its mission and shares appropriate information on this achievement with relevant groups (e.g., Advisory Councils, faculty, staff, students, and the public).

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| **Standard I.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard II: Institutional Effectiveness and Strategic Planning

1. **Institutional Effectiveness Planning:** The institution demonstrates a commitment to its educational offerings and administrative operations through processes that monitor and improve institutional effectiveness. The institution engages in sound research practices; collects and analyzes evidence about its effectiveness; and develops action plans that are used to improve operations, educational offerings, and services.

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| **Standard II.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Strategic Planning:** The institution has a systematic process of planning for the achievement of goals that supports its mission. The institution’s planning process involves all areas of the institution’s operations (e.g., admissions, academic, technology, etc.) in identifying strategic initiatives and goals by evaluating external and internal trends as they affect the future. At a minimum, the strategic plan addresses finances, academics, technology, admissions, marketing, personnel, and institutional sustainability. The strategic plan is reviewed and updated annually using established metrics designed to measure achievement of strategic planning goals and objectives. The plan helps institutions set priorities, manage resources, and set goals for future performance.

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| **Standard II.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard III: Program Outcomes, Curricula, and Materials

1. **Description of Program Outcomes:** Program outcomes are clearly defined, simply stated, and indicate the benefits for students who are reasonably capable of completing the educational offering. Course learning outcomes are linked to program outcomes as identified by the institution and are consistent with the curricula offered.

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| **Standard III.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Appropriate Program Outcomes:** The program outcomes are measurable and reasonably attainable through distance education. Appropriate program outcomes clearly communicate the knowledge, skills, and abilities students will obtain upon completion of the educational offering. Program outcomes reflect the level of student achievement expected that promotes critical thinking, ethical reasoning, social responsibility, global citizenship, civic engagement, or lifelong learning as applicable to the educational offerings.
	1. Degree Programs

All required academic or professional activities, such as program outcomes, course learning outcomes, research projects, supervised clinical practice, field work, applied research exercises, theses, and dissertations, are clearly stated.

* 1. Capstone projects, if required, are consistent with academic and professional standards based on commonly accepted higher education practices and any applicable relevant professional organizations. Capstone project learning outcomes are clearly stated.
	2. Doctoral Degrees

The outcomes of doctoral degree programs are advanced, focused, and scholarly, providing the breadth and depth of learning indicative of advanced degrees.

* + 1. Professional doctoral degrees prepare scholars to become leaders in their field of study through the pursuit of and contribution to contemporary research that is applied, practical, or project-oriented and is focused on the application of knowledge to a profession.
		2. The learning activities of doctoral degree programs include, as appropriate, seminars, professional meetings, in-residence requirements, discussions with colleagues, participation in sustained synchronous or asynchronous online conferences at predetermined points throughout the program, access to library services, and access to online chat rooms with fellow students, faculty, and relevant professionals.
		3. The professional doctoral degree program requires students to work with a supervisory dissertation/research project committee that is knowledgeable in graduate-level study and research methods in the discipline. Doctoral degree program curricula include the history and development of the field of study and its foundational theoretical principles.

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| **Standard III.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Curricula Delivery:** All curricula and instructional materials are appropriately designed and presented for distance education. Online materials sufficiently support the curriculum and are delivered using readily available, reliable technology.

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| **Standard III.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Comprehensive Curricula and Instructional Materials:** Curricula and instructional materials are sufficiently comprehensive for students to achieve the stated program outcomes. Their organization and content are supported by reliable research and practice. The organization and presentation of the curricula and instructional materials reflect sound principles of learning and are grounded in distance education instructional design principles. The curricula and instructional materials reflect current knowledge and practice. Curricula and instructional materials are kept up-to-date, and reviews are conducted and documented on a periodic basis. Instructions and suggestions on how to study and how to use the instructional materials are made available to assist students to learn effectively and efficiently.
	1. The institution maintains an Advisory Council for each major group of programs or major subject matter discipline it offers. The Advisory Council includes members not otherwise employed or contracted at the institution, consisting of practitioners and employers in the field for which the program prepares students. Advisory Councils:
		1. meet at least annually;
		2. provide advice on the current level of skills, knowledge, and abilities individuals need for entry into the occupation; and
		3. provide the institution with recommendations on the adequacy of educational program outcomes, curricula, and course materials.
	2. The institution determines whether courses in a program require any prerequisites. The institution also determines whether courses are offered in a prescribed sequence to maximize student achievement of program outcomes.
	3. General Education for Degree Granting

General education courses convey broad knowledge and intellectual concepts to students and develop skills and attitudes that contribute to civic engagement, academic achievement and professional attainment. General education courses address content not associated with a particular field of study. General education courses encompass written and oral communication; quantitative principles, natural and physical sciences; social and behavioral sciences; and humanities and fine arts and are designed to develop essential academic skills for enhanced and continued learning.

* 1. Associate Degree

Associate degrees are awarded in academic or professional subjects for terminal career or technical programs. Institutions design and offer programs in a way that appropriately balances distinct types of education and training and includes a comprehensive curriculum with appropriate coursework to achieve the program outcomes. Associate degree programs consist of a minimum of 60 semester credit hours or 90 quarter credit hours. General education courses account for a minimum of 25 percent of the credits required for successful completion of associate degree programs.

* 1. Bachelor’s Degree

Bachelor’s degree programs are designed and offered in a way that appropriately balances distinct types and levels of education and must include a comprehensive curriculum with appropriate coursework to achieve the program outcomes. Bachelor’s degree programs consist of a minimum of 120 semester credit hours or 180 quarter credit hours. General education courses represent a minimum of 25 percent of the credits required for successful completion of a bachelor’s degree program.

* 1. Master’s Degree

Master’s degree programs are designed and offered in a way that provides for a distinct level of education and fosters independent learning and an understanding of research methods appropriate to the academic discipline. Graduate-level courses are based on appropriate prerequisites, learning outcomes, and assessments. Institutions establish whether graduate courses are completed in a prescribed sequence to facilitate student achievement of program outcomes. Master’s degree programs are a minimum of 30 semester credit hours or 45 quarter credit hours.

* 1. First Professional Degree

First professional degree programs are designed to offer a required academic credential leading to entry into a specific profession. The graduate degree program identifies competencies required for successful practice in the discipline. First professional degree programs require prior undergraduate preparation appropriate to the degree offered. Graduates of the first professional degree program demonstrate competencies that enable them to evaluate theories and engage in research relevant to the field of study. Demonstrated learning outcomes are comparable to those achieved during a minimum of 50 semester credit hours, 75 quarter credit hours, or their equivalent beyond the bachelor’s degree.

* 1. Professional Doctoral Degree

Professional doctoral degree programs are designed to offer practice-oriented content leading to an advanced academic credential. Professional doctoral degree programs identify and teach competencies that support advancements in the field of study. Graduates of professional doctoral degree program demonstrates the ability to conduct, interpret, and apply the results of appropriate research. Adequate oversight and advising are provided through all phases of the doctoral program, including clinical practice or fieldwork required by the field of study.

* + 1. Unless otherwise specified for a particular field of study (e.g. nursing, engineering), the program of study requires 60 graduate-level semester credit hours, 90 graduate-level quarter credit hours, or their equivalent beyond the master’s degree with a maximum of 15 semester credit hours or 22.5 quarter credit hours for the dissertation or final research project. Professional doctoral degree programs are completed in no fewer than two years and no more than 10 years from the date of initial enrollment. A first professional degree in the same discipline may reduce the program requirements when the institution requires a minimum of 90 total graduate semester credit hours or 135 quarter credit hours after the bachelor’s degree.
		2. Professional doctoral degrees require dissertations or capstone projects involving original contributions to the field of study using applied research methods. An appropriately credentialed doctoral committee approves dissertation and capstone project topics. A dissertation or capstone project manual is provided that includes guidelines on identifying, researching, writing on, and presenting the selected topic. Dissertations or capstone projects are appropriately defended by doctoral candidates before a doctoral committee via distance or in person. Professional doctoral degrees are awarded upon final approval by a majority of the doctoral committee.

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| **Standard III.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Curricula Development and Delivery:**
	1. Qualified persons competent in distance education instructional design practices work with experts in their subjects or fields to develop the content of all curricula and prepare instructional materials.
	2. The institution describes its model for distance education delivery such as: correspondence, online, or hybrid.
	3. Any contracting with a third party for educational delivery is conducted in accordance with DEAC Processes and Procedures, Part Two, Section XIII F.4 and F.5, Changes in Educational Offerings."

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| **Standard III.E. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Academic Units of Measurement:** The institution documents policies and procedures used to define the chosen academic unit of measurement. Academic units are measured by either clock hours or credit hours.
	1. Clock Hours

The institution documents its implementation and application of policies and procedures for determining clock hours awarded for its courses and programs. A clock hour is one instructional hour. One instructional hour is defined as 50 minutes of instruction in a 60-minute period.

* 1. Credit Hours

The institution documents its implementation and application of policies and procedures for determining credit hours awarded for its courses and programs. The assignment of credit hours must conform to commonly accepted practices in higher education. A credit hour is defined as an amount of work represented by intended learning outcomes and verified through evidence of student achievement in academic activities.

* 1. Credit Hour Definition

Semester and quarter hours are equivalent to the commonly accepted and traditionally defined units of academic measurement. Academic degree or academic credit-bearing distance education courses are measured by the learning outcomes normally achieved through 45 hours of student work for one semester credit1 or 30 hours of student work for one quarter credit.2

1*One credit/semester hour is 15 hours of academic engagement and 30 hours of preparation.*

*2One quarter hour credit is 10 hours of academic engagement and 20 hours of preparation.*

* 1. Documenting Credit Hours

The institution demonstrates that each course and program requires the appropriate amount of work needed for students to achieve the level of competency defined by institutionally established course/program outcomes. The institution measures and documents the amount of time it takes the average student to achieve learning outcomes and specifies the academic engagement and preparation time.

All student work is documented in the curricula materials and syllabi, including a reasonable approximation of time required for students to complete the assignments. Evaluation of student work is identified as a grading criterion and weighted appropriately in the determination of a final course grade.

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| **Standard III.F. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Educational Media and Learning Resources:** Learning resources for faculty and students are available and appropriate to the level and scope of program offerings. Program designers, faculty, and instructors effectively use appropriate teaching aids and learning resources, including educational media and supplemental instructional aids, when creating programs and teaching students. The institution provides faculty and students with access to learning resources, libraries, or resource-related services that are appropriate for the achievement of program learning outcomes.
	1. Undergraduate Degrees

Learning resources are systematically and regularly evaluated to assure that they meet student needs and support the institution’s programs and mission. A variety of educational materials are selected, acquired, organized, and maintained to fulfill the institution’s mission and support all educational offerings. Faculty are involved in the selection of learning resources.

* 1. Graduate Degrees

In addition to the requirements for undergraduate degrees, graduate students are provided with access to library and other learning resources that are sufficient for research at the graduate level. The institution provides and encourages the use of library services and, if required, research and laboratory facilities at a distance or through arrangements with local institutions.

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| **Standard III.G. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Examinations and Other Assessments:** Examinations and other assessment techniques provide adequate evidence of the achievement of stated learning outcomes. The institution establishes and enforces grading criteria that it uses to evaluate and document student attainment of learning outcomes.
	1. Undergraduate Degrees

The institution assesses student achievement through multiple means of evaluation (e.g., student presentations, group projects, essays, research papers, participation in threaded discussions, supervised practica, or externships).

* 1. Master’s Degrees

The institution assesses student achievement through multiple means of evaluation, including a culminating experience required for program completion (e.g., capstone experience, comprehensive examination, research project, or master’s thesis).

* 1. First Professional and Doctoral Degrees

The institution assesses student achievement through multiple means of evaluation, including qualifying examinations, comprehensive examinations, and dissertation or final research project. The institution requires students to successfully complete a comprehensive examination when all coursework is completed and prior to commencing work on the dissertation or final research project.

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| **Standard III.H. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Integrity and Academic Honesty:** The institution publishes clear, specific, policies related to student integrity and academic honesty. The institution affirms that the student who takes an assessment is the same person who enrolled in the program and that the examination results will reflect the student’s own knowledge and competence in accordance with stated learning outcomes.
	1. Non-Degree Programs

Institutions meet this requirement by using a secure login and passcode, administering proctored assessments, or by other means of secure technology.

* 1. Degree Programs

In addition to the requirements for non-degree programs above, degree-granting institutions meet this requirement by administering proctored assessments at appropriate intervals throughout the program of study and provide a clear rationale for placement of the proctored assessments within the program. Proctors use valid government-issued photo identification or other means to confirm student identity.

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| **Standard III.I. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Institutional Review Board:** For any final research project, master’s thesis, or dissertation that involves human research, the institution must require prior formal review and approval for all such research involving human subjects through an institutional review board (IRB), which has been designated to approve, monitor, and review all research involving human subjects. The IRB should ensure that the subjects are not placed at undue risk, that they have voluntarily agreed to participate, and that they have given appropriate informed consent. The IRB must meet all federal regulations, and the institution must be able to demonstrate that it is in compliance, including providing evidence that all IRB members have had appropriate training. (Title 45 Code of Federal Regulations Part 46)

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| **Standard III.J. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding.  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard IV: Educational and Student Support Services

1. **Appropriate Technology:** The institution uses appropriate and readily accessible technology to optimize interaction between the institution and the student that effectively supports instructional and educational services. Students, faculty, and involved practitioners receive training and support for the technology used to deliver the educational offerings.

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| **Standard IV.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Inquiries and Submissions:** The institution publishes all available methods students can use to submit inquiries and assignments. The institution responds promptly and thoroughly to all student inquiries using all these channels.

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| **Standard IV.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Individual Differences:** Academic advising and instructional support are provided to assist students in achieving institutional and program requirements, program outcomes, course learning outcomes, and educational goals consistent with best educational practices and as required by applicable federal and state laws.

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| **Standard IV.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Encouragement of Students:** The institution’s policies and procedures optimize interaction between the institution and students. The interaction proactively promotes student completion and success.

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| **Standard IV.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Satisfactory Academic Progress:** The institution implements and consistently applies a satisfactory academic progress policy and discloses this policy to students. Standards for measuring satisfactory academic progress include qualitative and quantitative standards used for evaluation of student progress. The institution takes appropriate action if students fail to meet the institution’s minimum standards of progress. Students are informed of their academic progress and standing in the program at regular intervals throughout their enrollment.

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| **Standard IV.E. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Grading Policies:** Student academic performance is measured using published grading policies that include prompt return of accurately, fairly, and consistently graded assessments that are supervised by a qualified instructor or faculty member. The institution publishes its assignment marking system, course extension policy, and information on issuance and completion of incomplete grades, and applies them with fairness and consistency.

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| **Standard IV.F. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Records:** Accurate student records are securely and confidentially maintained. Policies and procedures for keeping records on students’ academic progress are in accordance with applicable federal and state laws and professional requirements. Transcripts are readily accessible and are maintained permanently in either print or digital form.

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| **Standard IV.G. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Confidentiality and Privacy:** The institution’s policies protect student confidentiality and privacy as required by applicable federal and state laws.

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| **Standard IV.H. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Support Services:** The institution provides support services designed for the students enrolled, such as financial aid guidance, advising services, employment assistance, and/or alumni services. Appropriate academic support services are readily available. Any career services and/or alumni services are offered as published in the institution’s materials.

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| **Standard IV.I. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Complaints:** The institution has policies and procedures for receiving, responding to, and addressing student complaints. The policies and procedures should embody the principles of fairness, responsiveness, respect, due process and proportionality.
	1. Institutional Complaints

DEAC requires institutions to have written complaint policies and procedures for the purposes of receiving, responding to, addressing, and resolving complaints made by students, faculty, administrators, or any party, including one who has good reason to believe that an institution is not in compliance with DEAC accreditation standards.

* 1. At a minimum, the institution’s policy instructs students how to file a complaint or grievance and the maximum time for resolution. The institution’s complaint policy and procedures are available to all students. The institution defines what it reasonably considers to be a student complaint.
	2. The institution reviews in a timely, fair, and equitable manner any complaint it receives from students. When the complaint concerns a faculty member or administrator, the institution may not complete its review and make a final decision regarding a complaint unless, and in accordance with its published procedures, it ensures that the faculty member or administrator has sufficient opportunity to provide a response to the complaint. The institution takes any follow-up action, including enforcement action if necessary, based on the results of its review.
	3. The institution’s complaint policy states how complaints can be filed with state agencies and its accrediting organization.
	4. The institution will retain the complete files for all complaints which may be filed against the institution, its faculty, staff, students or other associated parties for the longer of five years from the filing of the complaint or the completion of the institution’s next cycle of evaluation for reaccreditation.

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| **Standard IV.J. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard V: Student Achievement and Satisfaction

1. **Student Achievement:** The institution evaluates student achievement using indicators that it determines are appropriate relative to its mission and educational offerings. The institution evaluates student achievement by collecting data from outcomes assessment activities using direct and indirect measures. The institution maintains systematic and ongoing processes for assessing student learning and achievement, analyzes data, and documents that the results meet both internal and external benchmarks, including those comparable to courses or programs offered at peer DEAC-accredited institutions. The institution demonstrates and documents how the evaluation of student achievement drives quality improvement of educational offerings and support services.

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| **Standard V.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Satisfaction:** The institution systematically seeks student and alumni opinions as one basis for evaluating and improving curricula, instructional materials, method of delivery, and student services. The institution regularly collects evidence that students are satisfied with the administrative, educational, and support services provided.

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| **Standard V.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Performance Disclosures:** The institution routinely discloses on its website reliable, current, and accurate information on its performance, including student achievement, as determined by the institution.

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| **Standard V.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard VI: Academic Leadership and Faculty Qualifications

1. **Academic Leadership:** The institution demonstrates appropriate academic leadership capacity and infrastructure to support the effective distance education delivery of educational offerings. Academic leaders possess the academic credentials, background, knowledge, ethics, and experience necessary to guide the instructional activities of the institution.

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| **Standard VI.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Chief Academic Officer (CAO) or Educational Director:** The institution designates a chief academic officer, educational director, or other similar oversight position. This individual is responsible for overall administrative of the educational program(s); for the educational, editorial, and research activities within departmental subject fields; and for faculty/instructors. The individual also informs marketing decisions.

Within the context of the institution’s mission:

* 1. The CAO or education director has appropriate academic administrative experience and competence necessary to lead and manage educational offerings in a distance education environment.
	2. The CAO or education director possesses academic credentials that are appropriate for the leadership, supervision, and oversight of faculty, curriculum design, and student achievement expectations.
	3. Doctoral Degrees

The institution appoints a director for doctoral degree programs. The director possesses previous higher education administrative capacity and distance learning knowledge to lead doctoral programs. The director possesses the appropriate terminal degree earned from an appropriately accredited institution in a subject area relevant to the degree program being offered.

* 1. Dissertation Supervisory Committee

A doctoral committee of at least three faculty members is assigned for each student. Doctoral committee members possess appropriate credentials, scholarship, experience, and practice in the field of study. At least one member of the doctoral committee is a member of the awarding institution’s faculty. At least two members of the doctoral committee have earned doctoral degrees from appropriately accredited institutions other than from the awarding institution. All committee members are qualified in the subject area of the dissertation or research project topic. The institution has final approval for students who nominate faculty to the doctoral committee.

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| **Standard VI.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Instructors, Faculty, and Staff:** Faculty/instructors are qualified and appropriately credentialed to teach the subject at the assigned level. The institution employs a sufficient number of qualified faculty/instructors to provide individualized instructional service to each student. The institution maintains faculty/instructor résumés, official transcripts, and copies of applicable licenses or credentials on file. Faculty/instructors are carefully screened for appointment and are properly and continuously trained on institutional policies, learner needs, instructional approaches and techniques, and the use of instructional technology. The institution regularly evaluates faculty and administrator performance using clear, consistent procedures. The institution assures that faculty are appropriately involved and engaged in the curricular and instructional aspects of the educational offerings. Faculty are assigned responsibilities based on their degree qualifications and/or area(s) of expertise.
	1. High School

The institution provides evidence that all faculty/instructors are qualified and appropriately credentialed to teach the subject and level within the high school program offered.

* 1. Non-Degree

Instructors teaching technically- or practice-oriented courses have practical experience in the field and possess current licenses and/or certifications, as applicable.

* 1. Occupational/Technical Associate Degree

Faculty possess earned credentials awarded by appropriately accredited institutions and/or have practical experience in the field and possess current licenses and/or certifications if applicable. The institution must demonstrate the academic preparation and practical experience of each faculty member consistent with accepted postsecondary education practices.

* 1. Undergraduate Degrees

Faculty teaching undergraduate degree program courses possess, at a minimum, a degree at least one level above that of the program they are teaching and demonstrate expertise in the subject field of the discipline. Faculty teaching general education courses at the undergraduate level, including occupational/technical associate degrees, must possess a master’s degree in the assigned general education subject field or have a master’s degree and 18 semester credit hours in the general education subject field.

* 1. Master’s Degrees

Faculty teaching graduate-level courses in a master’s degree program must possess, at a minimum, a doctoral/terminal degree earned at an appropriately accredited institution in the subject field of the discipline and demonstrate familiarity with practical applications of the field.

* 1. Faculty Qualification Equivalency

In limited and exceptional cases, institutions may demonstrate that faculty are qualified to teach at the undergraduate and master’s levels through faculty qualification equivalency. Such equivalency is demonstrated by evidence of substantial breadth and depth of experiences and knowledge that are relevant to the discipline in which the faculty member is teaching. An institution that intends to substitute faculty qualification equivalency for the degree qualifications set forth in Standards VI.C.4 and VI.C.5 must have:

* + 1. well-defined policies, procedures and documentation that demonstrate how experience and knowledge are sufficient to determine that the faculty member has the expertise necessary to teach students in that discipline; and
		2. procedures that ensure that adequate oversight of teaching and learning is provided by individuals who possess degree qualifications in accordance with Standards VI.C.4 and VI.C.5.
	1. First Professional Degrees

All teaching faculty and involved practitioners possess a first professional or higher degree earned at an appropriately accredited institution in a related subject field and possess specialized knowledge and skills in the subject area, consistent with educational practices of other similar programs.

* 1. Professional Doctoral Degrees

All teaching faculty possess terminal degrees (e.g., professional doctoral degree or Ph.D.) earned at an appropriately accredited institution in a related subject field. Prior to enrolling students, the institution has in place a dedicated dean, director, or other academic officer with credentials appropriate to the degree(s) being offered.

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| **Standard VI.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable**  | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Professional Growth:** The institution demonstrates a commitment to faculty and staff professional development. The institution encourages faculty and staff to become members of professional organizations, to review and apply relevant research, to pursue continuing education or training in their respective fields, and to enhance their skills in developing and using electronically delivered, online, or other forms of distance study. The institution provides faculty and administrators with access to a collection of professional educational materials to keep abreast of current trends, developments, techniques, research, and experimentation.

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| **Standard VI.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard VII: Advertising, Promotional Literature, and Recruitment Personnel

1. **Advertising and Promotion:** The institution conforms to ethical practices in all advertising and promotion to prospective students. All advertisements, website content, and promotional literature are truthful, accurate, clear, and readily accessible to the public; proactively states that programs are offered via distance education; and appropriately discloses occupational opportunities as applicable. Catalogs, enrollment agreements, manuals, and websites list the institution’s full name and physical address. At a minimum, all print advertisements and promotional literature include the institution’s city, state, and website home page URL where, in compliance with DEAC’s website disclosures checklist, the institution’s physical address is provided. All web-based advertisements provide a link to the institution’s website home page URL. All institutional social media account profiles provide a link to the institution’s website home page URL. The institution complies with the DEAC’s catalog disclosures checklist and DEAC’s website disclosures checklist.
	1. All advertisements and promotional materials accurately reflect the programs and services offered by the institution. The word “guarantee” is never used in advertisements. Under limited and exceptional circumstances, institutions may use the word “free” when it is appropriate to the mission and purpose of the institution.
	2. The institution’s website testimonials and endorsements are truthful and less than four years old. The institution maintains signed student consent forms for each published testimonial. The institution’s website discloses all program requirements, course descriptions, tuition and related costs, program schedules, method of delivery, and its catalog prior to the collection of any personal student contact information. The institution does not use other institutions as triggers for its own sponsored links on Internet search engines.
	3. The institution discloses in its catalog, website, and enrollment agreements that the acceptance of earned transfer credits is determined by the receiving institution.
	4. The institution adheres to applicable catalog, website, and enrollment agreement disclosures checklists, based on educational offerings. The institution publishes student consumer information as required by federal and state statute and regulations.
	5. Any incentives offered to prospective and current students to enroll must be limited in nature to institution-branded items and in no event may such items exceed an aggregate value of $100 annually with respect to any individual.
	6. The institution permanently archives its catalogs.

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| **Standard VII.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Institution and Course Accredited-Status Recognition:** The institution accurately reflects its accredited status and uses the official DEAC accreditation logo and/or statement of accreditation when publishing its accreditation status in advertisements and promotional materials on its website, and in social media. DEAC’s name, address, telephone number, and web address are published in the institution’s catalog.
	1. The institution publishes a statement of accreditation only as follows:
		* + Accredited by the Distance Education Accrediting Commission
			+ DEAC Accredited
	2. The institution refers to DEAC’s recognition by the U.S. Department of Education only as follows: “The Distance Education Accrediting Commission is listed by the U.S. Department of Education as a recognized accrediting agency.”
	3. The institution refers to DEAC’s recognition by the Council for Higher Education Accreditation (CHEA) only as follows: “The Distance Education Accrediting Commission is recognized by the Council for Higher Education Accreditation (CHEA).”
	4. The accredited institution publicly corrects any misleading or inaccurate information it releases on its accreditation status, contents of its on-site team reports from accreditation-related visits, and/or actions taken by the Distance Education Accrediting Commission with respect to the institution.
	5. All courses and programs are approved by DEAC before the institution advertises or enrolls students in them. The institution uses the term “College” or “University” in its name only if it offers academic degree programs.

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| **Standard VII.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Recruitment:** The institution demonstrates ethical processes and procedures are followed throughout the recruitment of prospective students by any individual who is authorized by the institution to participate in the enrollment process with prospective students. Minimum ethical practices and procedures are identified below.
	1. The institution takes full responsibility for the actions, statements, and conduct of its authorized recruitment personnel. The institution maintains appropriate records, licensures, registrations, signed employment contract, and signed DEAC Code of Ethics, as applicable for all recruitment personnel. The institution demonstrates it adequately trains its recruitment personnel and provides them with accurate information concerning employment and remuneration. All authorized recruitment personnel are provided with appropriate materials covering applicable procedures, policies, and presentations. The institution demonstrates that it routinely monitors its recruitment personnel or independent organizations that provide prospective applicants names to assure they are in compliance with all state, federal, and DEAC recruitment practices.
	2. All personnel involved in student recruitment, including telemarketing staff, conform to applicable federal, state, and international laws. Personnel involved in student recruitment may not be given and may not use any title that indicates special qualifications for career guidance, advising, or registration, nor may they publish advertisements without written authorization from the institution.
	3. If an institution offers students nominal gifts for referring prospective students to the institution who ultimately enroll in the institution, such gifts must be limited in nature to institution-branded items and in no event may exceed an aggregate value of $100 annually with respect to any individual.

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| **Standard VII.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard VIII: Admission Practices and Enrollment Agreements

1. **Admissions Disclosures:** Admissions policies and procedures are designed to assure that the institution enrolls only those students who are reasonably capable of successfully completing and benefiting from the educational offerings.
	1. The institution informs each applicant, prior to admission, of the admissions criteria, the nature of the education provided, and the demands of the educational offerings. Prior to completing the enrollment process, the institution requires students to affirm access to the catalog and other institutional documents disclosing the rights, responsibilities, and obligations of both the student and the institution.
	2. The institution admits students regardless of race, color, national origin, disability, sex, or age. Institutions reasonably accommodate applicants and students with disabilities to the extent required by applicable laws.
	3. Official transcripts, if required for admission, are received within one enrollment period not to exceed 12 semester credit hours, or the student is withdrawn from the program.

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| **Standard VIII.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Student Identity Verification:** Student identity verification is initiated during the admissions process to verify that the admitted student who participates in and completes coursework and assessments is the same student who is awarded credit.

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| **Standard VIII.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Compulsory Age Students:** An institution enrolling students under the compulsory school age obtains permission from responsible parties to assure that the pursuit of the educational offerings is not detrimental to any compulsory schooling.

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| **Standard VIII.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Admissions Criteria:** The institution’s admissions criteria aligns with its mission and student population served. The institution establishes qualifications that an applicant possesses prior to enrollment in order to successfully complete the stated educational offerings. The institution consistently and fairly applies its admission requirements. If an institution enrolls a student who does not meet the admissions criteria, the institution documents the reason(s) for the exception to the admissions criteria.
	1. Transcripts not in English are evaluated by an appropriate third party and translated into English or evaluated by a trained transcript evaluator fluent in the language on the transcript. Evaluators possess expertise in the educational practices of the country of origin and include an English translation of the review.
	2. The institution’s admissions criteria disclose procedures for verifying appropriate language proficiencies. The institution verifies English language proficiency for applicants whose native language is not English and have not earned a degree from an appropriately accredited institution where English is the principal language of instruction. Verification procedures align with DEAC’s guidance on English Language Proficiency Assessment.
	3. Non-Degree Programs

As appropriate for the students served and educational programs offered, the institution obtains official documentation that applicants possess a high school diploma or its recognized equivalent at the time of admission (e.g., high school diploma, general educational development tests [GED], or self-certification statement).

Institutions that implement self-certification procedures must:

* + - * obtain a signed statement from the applicant attesting to a high school diploma or its recognized equivalent;
			* require applicants to provide the institution name, city, state, and year of graduation on the self-certification statement;
			* develop and follow procedures to evaluate the validity of high school completion, or its equivalent, if the institution has reason to believe that the documentation was not obtained from an entity that provides secondary school education (e.g., general educational development tests or GED); and
			* document that such practices are necessary to be consistent with the institution’s mission.
	1. Undergraduate Degrees

The institution obtains official documentation that applicants possess a high school diploma or its recognized equivalent at the time of admission (e.g., high school diploma or general educational development tests [GED]). Institutions may implement self-certification in accordance with VIII.D.3.

* 1. Master’s Degrees

At the time of admission, the institution obtains official documentation that applicants possess a bachelor’s degree earned from an appropriately accredited institution.

* 1. First Professional Degrees

At the time of admission, the institution obtains documentation that applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution.

* 1. Professional Doctoral Degrees

At the time of admission, the institution obtains documentation that applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution and relevant academic experience. At a minimum, the institution verifies that applicants have completed 30 graduate-level credit hours prior to admission.

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| **Standard VIII.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Admission Acceptance and Denial:** The institution informs applicants that they have been accepted for admission. The institution communicates with the applicant and documents the basis for any denial of admission.

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| **Standard VIII.E. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Transfer Credits:** The institution implements a fair and equitable transfer credit policy that is published in the catalog. The steps for requesting transfer credit are clear and disclose the documentation required for review. Students are able to appeal transfer credit decisions using published procedures. Transfer credit requests are not denied based solely on the source of accreditation of the credit-granting institution.

Credit awarded for experiential or equivalent learning, including challenge and test-out credits, cannot exceed 25 percent of the credits required for an undergraduate degree. Institutions maintain official documentation of the bases for decisions to award credit for experiential or equivalent learning.

An institution seeking to offer credit for prior learning assessment publishes evaluation standards consistent with CAEL’s Ten Standards for Assessing Learning. Prior learning assessment is performed by qualified individuals with experience in the evaluation of prior learning.

In instances where a student seeks to transfer more than the maximum allowable percentage of required credit hours specified in the relevant degree category listed in subsection F.2 through F.5 below, the institution must conduct a comprehensive assessment of the student’s credits earned and document how the credits align with its program outcomes. In such cases, transfer credit allowances may not exceed the lesser of any applicable state requirements or 90 percent of the credits required for undergraduate degrees, 75 percent of the credits required for master’s degrees or first professional degrees, or 40 percent of the credits required for professional doctoral degrees.

* 1. High School

The institution may award a maximum of 75 percent of the credits required for a high school program.

* 1. Undergraduate Degrees

The institution may award a maximum of 75 percent of the credits required for a degree program or a combination of transfer credit and experiential or equivalent credit (including challenge/test-out credits). Courses accepted for transfer credit are relevant to the program of study and equivalent in both content and degree level. Credit awarded for experiential or equivalent learning cannot exceed 25 percent of the credits required for a degree.

* 1. Master’s Degrees

The institution may award a maximum of 50 percent of the credits required for a master’s degree program through transfer credit. Courses accepted for transfer credit are relevant to the program of study and equivalent in both content and degree level. Credit awarded for experiential or equivalent learning cannot exceed 25 percent of the credits required for a master’s degree.

* 1. First Professional Degrees

The institution may award a maximum of 50 percent of the credits required for a first professional degree program through transfer credit. Courses accepted for transfer credit are relevant to the program of study and equivalent in both content and degree level.

* 1. Professional Doctoral Degrees

The institution may award a maximum of 15 percent of the credits required for a professional doctoral degree program (or nine semester credit hours for a 60 semester credit hour degree program) through transfer credit. Courses accepted for transfer credit are relevant to the program of study and equivalent in both content and degree level.

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| **Standard VIII.F. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Enrollment Agreements:** The institution’s enrollment agreements/documents clearly identify the educational offering and assure that each applicant is fully informed of the rights, responsibilities, and obligations of both the student and the institution prior to applicant signature. The institution complies with the DEAC Enrollment Agreements Disclosures Check List.
	1. The institution requires that, prior to accepting the enrollment agreement, students affirm and accept the tuition refund policy and the rights, responsibilities, and obligations of both the student and the institution. The terms of the tuition refund policy are published in the institution’s enrollment agreement, catalog, and website.
	2. An enrollment agreement is not binding until it has been submitted by the student and accepted by the institution. A copy of the accepted enrollment agreement is made available to the student within 10 days of acceptance and maintained as a part of the student’s record.
	3. The institution complies with the applicable Truth in Lending Act (TILA) requirements, including those under Regulation Z, and state requirements for retail installment agreements.
	4. All required state and Truth in Lending Act disclosures are included on the enrollment agreement. Requirements for type size, notice to buyer and computations examples, as applicable, are observed.
	5. If there is a separate payment contract, the contract is incorporated in the enrollment agreement.

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| **Standard VIII.G. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard IX: Financial Disclosures, Cancellations, and Refund Policies

1. **Financial Disclosures:** All costs relative to the education provided by the institution are disclosed to the prospective student [in an enrollment agreement or similar contractual document] before enrollment. Costs must include tuition, educational services, textbooks, and instructional materials; any specific fees associated with enrollment, such as application and registration fees; and fees for required services such as student authentication, proctoring, technology access, and library services.
	1. The costs for optional services, such as expedited shipment of materials, experiential portfolio assessment, or other special services, such as dissertation binding, are clearly disclosed to prospective students as not subject to refund after the five (5) calendar day student-right-to-cancel enrollment.
	2. The institution’s disclosure of its refund policy must include a sample refund calculation that describes the calculation methodology using clear and conspicuous language. Student acknowledgement of the refund policy is obtained and documented in the enrollment agreement or similar contractual document prior to enrollment.

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| **Standard IX.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Cancellations:**
	1. Institutions must maintain, publish, and apply fair and equitable cancellation and withdrawal policies. A student’s notification of cancellation may be conveyed to the institution in any manner the institution deems appropriate so long as the method or methods chosen
		1. are in compliance with applicable federal and state requirements and
		2. do not create unreasonably difficult requirements for the student to satisfy.

Institutions must designate the manner in which students may submit cancellation or withdrawal notification and the individual, office, or offices to whom students may submit notice of official cancellation or withdrawal.

* 1. A student has five (5) calendar days after signing an enrollment agreement or similar contractual document to cancel enrollment and receive a full refund of all monies paid to the institution.
	2. A student requesting cancellation more than five calendar days after signing an enrollment agreement, but prior to beginning a course or program is entitled to a refund of all monies paid minus:

		+ - An application/transfer credit evaluation fee of up to $75;
			- A one-time registration fee per program of no more than 20% of the tuition and not to exceed more than $200; and
			- Library services fee, if provided by a third-party service (e.g., LIRN, Westlaw, ProQuest, EBSCO)
	3. Upon cancellation, a student whose costs for education are paid in full, but who is not eligible for a refund, is entitled to receive all materials including kits and equipment.
	4. If promissory notes or enrollment agreements are sold to third parties, the institution ensures that it and any third parties comply with DEAC cancellation policies.

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| **Standard IX.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Refunds:** Each institution must have and implement a fair and equitable refund policy in compliance with state requirements or, in the absence of such requirements, in accordance with DEAC’s refund policy standards below and disclosed in the enrollment agreement or similar contractual document.

Any money due a student must be refunded within 30 days of a cancellation request, regardless of whether materials have been returned.

* 1. **Flexible Time Schedule Refund Policy:** An institution that implements the flexible time schedule refund policy must clearly disclose the curriculum benchmarks in terms of assignments submitted for grading that indicate completion at 10 percent, 25 percent, and 50 percent intervals.

When a student cancels after completing at least one lesson assignment, but less than 50 percent of the graded assignments, the institution may retain the application fee and one-time registration fee of no more than 20 percent of the tuition (not to exceed $200), and library services fees, plus a percentage of tuition paid by the student in accordance with the published schedule.

* 1. **Time-Based Term Refund Policy:** A time-based term last no more than 16 weeks.

A time-based term refund policy may be applied to any course, program, or degree. Institutions that utilize the time-based term refund policy must refund 100 percent of the tuition for any course never started. Institutions that implement the time-based term refund policy must clearly disclose the time-based refund schedule on the enrollment agreement.

When enrolling students in an academic program of study comprised of two or more courses that award semester credit hours, institutions must treat each course separately for the purposes of calculating the appropriate amount of tuition refund owed to the student.

When a student cancels enrollment, the institution may retain the application fee and a one-time registration fee of no more than 20 percent of the tuition (not to exceed $200), and library services fees, plus a percentage of tuition paid by the student in accordance with the published refund schedule.

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| **Standard IX.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Discounts:** Discounted costs are permitted for well-defined groups for specific and bona fide purposes.

Discounted costs must indicate the actual reduction in the costs that would otherwise be charged by the institution. Institutions that offer discounts must demonstrate that students are enrolled in non-discounted courses or programs for a reasonably substantial period of time during each calendar year. An institution offering discounts must calculate refunds based on discounted costs.

An institution that offers discounts must demonstrate that:

* + - * All discounts or special offers identify the specific costs for a course or program.
			* The presentation of discounts and special offers complies with DEAC’s advertising and promotion standards.
			* All discounts (excluding those offered to well-defined groups) or special offers designate a specific expiration date and do not extend beyond the expiration date.

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| **Standard IX.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Collections:** Collection procedures used by the institution or third parties reflect sound and ethical business practices. Tuition collection practices and procedures are fair, encourage students’ progress, and seek to retain their good will. Collection practices consider the rights and interests of the students and the institution.

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| **Standard IX.E. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard X: Institutional Governance

1. **Owners, Governing Board Members, Officials, and Administrators:** The institution’s owners, governing board members, officials, and administrators possess appropriate qualifications and experience for their positions and ability to oversee institutional operations. The owners, governing board members, officials, and administrators are knowledgeable and experienced in one or more aspects of educational administration, finance, teaching/learning, and distance study. The institution’s policies clearly delineate the duties and responsibilities of owners, governing board members, officials, and administrators. Individuals in leadership and managerial positions are qualified by education and experience.

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| **Standard X.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Reputation of Institution, Owners, Governing Board Members, Officials, and Administrators:** The institution and its owners, governing board members, officials, and administrators possess sound reputations, a record of integrity, and ethical conduct in their professional activities, business operations, and relations. The institution must promptly notify DEAC of any investigative, enforcement, legal or prosecutorial actions which may be initiated or which are current against the institution, its owners, governing board members, officials and administrators. Such notification shall include an explanation of the circumstances giving rise to such actions and the institution’s response to the same as well as its explanation of why such actions should not be deemed a concern with respect to the integrity of the named persons or institutions.

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| **Standard X.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Succession Plan:** The institution has written plans that describes the process that it follows in the event a leadership succession is necessary. The plan identifies specific people, committees, or boards responsible to carry on the operation of the institution during the transition period. The plan includes a business continuity structure that the institution can implement immediately. The institution reviews and revises the plan on an annual basis.

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| **Standard X.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

## Standard XI: Financial Responsibility

1. **Financial Practices:** The institution shows it is financially responsible by providing complete, comparative financial statements covering its two most recent fiscal years and by demonstrating that it has sufficient resources to meet its financial obligations to provide quality instruction and service to its students. Financial statements are audited or reviewed and prepared in conformity with generally accepted accounting principles in the United States of America or International Financial Reporting Standards. The institution’s budgeting processes demonstrate that current and future budgeted operating results are sufficient to allow the institution to accomplish its mission and goals.

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| **Standard XI.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Financial Management:** Individuals overseeing the fiscal and budgeting processes are qualified by education and experience. The institution employs adequate administrative staff for effective operations, and at least one person is qualified and able to prepare accurate financial reports in a timely manner. Internal auditing trails and controls are in place to assure that finances are properly managed, monitored, and protected. Adequate safeguards prevent unauthorized access to online and onsite financial information.

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| **Standard XI.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Comments Related to Concerns Raised by the Commission:** Briefly summarize the issues raised by the Commission in the Deferral Letter, Show Cause Order, or special directive letter that initiated the on-site evaluation of the institution. Provide comments that describe what the team found the institution provided in response and whether the information appears to resolve the concern. Provide specific examples of the evidence the team relied upon to reach its determination. If the Commission did not cite this sub-standard, then simply insert the word “None.”

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Financial Stability and Sustainability:** The institution maintains adequate administrative staff and other resources to operate effectively as a going concern and is not exposed to undue or insurmountable risk. Any risk that exists is adequately monitored, manageable, and insured. In the event the financial operations of the institution are supported by a parent company or a third party, audited or reviewed financial statements are provided by the supporting entity to demonstrate that the supporting entity possesses sufficient financial resources to provide the institution continued financial sustainability, as well as the commitment to do so. If the institution’s financial performance is included within the parent corporation’s statements, a supplemental schedule for the individual institution is appended to the parent statement.

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| **Standard XI.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the accreditation standards. Each required action must correspond to an accreditation standard or a core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Financial Reporting:** Financial statements are prepared in conformity with generally accepted accounting principles in the United States of America often referred to as “GAAP,” including the accrual method of accounting. An independent certified public accountants (CPA) audit or review report accompanies these statements.
	1. The institution’s financial statements reflect sufficient liquid assets to provide for a staff and faculty.
	2. Annually, the institution has the option of submitting one of these two types of financial statements, unless the Commission directs the institution to submit audited financial statements:
		* + Audited comparative financial statements containing an audit opinion by an independent certified public accountant in accordance with standards established by the American Institution of Certified Public Accountants, or
			+ Reviewed comparative financial statements containing a review report by an independent certified public accountant in accordance with standards established by the American Institute of Certified Public Accountants.

When circumstances raise a concern as to the financial soundness and stability of an institution, the Commission may, in its discretion, require that the institution deliver within a specified period of time (as reasonably determined by the Commission taking into account, for example, the exigency of the concerns and the size of the institution), audited comparative financial statements or such other financial documentation as the Commission may determine will provide information as to the institution’s financial health and status.

* 1. Financial statements submitted must include the institution’s fiscal statement for either the most recent fiscal year end or the date specified by the Commission, the CPA’s opinion letter or review report, and a letter of financial statement validation.

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| **Standard XI.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Demonstrated Operations:** In all respects, the institution documents continuous sound and ethical operations, including the necessary resources to accommodate demand and assure all learners receive a quality educational experience. The institution’s name is free from any association with activity that could damage the reputation of the DEAC accrediting process, such as illegal actions, fraud, unethical conduct, or abuse of consumers.

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## Standard XII: Facilities, Equipment, Supplies, Record Protection and Retention

1. **Facilities, Equipment, and Supplies:** The institution maintains sufficient facilities, equipment, and supplies to achieve its mission and values and support its educational offerings and future operations. A written plan outlines the maintenance and upgrade of facilities, equipment, and supplies, and includes a disaster response and recovery plan. The plan states the resources that are budgeted to support its goals. Buildings, workspace, and equipment comply with local fire, building, health, and safety regulations and are appropriately equipped to handle the educational program(s) of the institution.

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| **Standard XII.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Record Protection:** The institution’s financial, administrative, and student educational records are maintained in a reasonably accessible place and are adequately protected in accordance with applicable federal and state laws.
	1. If maintaining documents electronically, the institution provides audit records to verify that the images were properly created and validated.
	2. If an institution accepts digitally signed transcripts or electronically transferred verified data from an outside source, the institution documents the outside source using a system that provides registration and verification of participants, protocols for securely sending and receiving files, logging of file transmissions, and electronic notification. The outside source complies with all applicable laws and regulations governing the activities and services provided, including FERPA and other laws concerning the privacy and confidentiality of information and records.

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| **Standard XII.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **Record Retention:** The institution’s financial, administrative, and student educational records are retained in accordance with applicable federal and state laws. The institution implements a comprehensive document retention policy.

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| **Standard XII.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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**Suggestions:** Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

1. **State Authorization:**
	1. The institution is properly licensed, authorized, exempted, or approved by all applicable state education institutional authorizations (or their equivalent for non-U.S. institutions).
	2. Exemptions from state law are supported by state-issued documentation or in statutory language for that state.

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| **Standard XII.E. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

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