

**READINESS ASSESSMENT COMPLIANCE ASSESSMENT FORM   
and REPORT TEMPLATE**

# Readiness Assessment Overview for Evaluators

The Distance Education Accrediting Commission requires all initial applicants to successfully complete a readiness assessment before continuing with the accreditation process.

The readiness assessment is conducted by a DEAC-appointed evaluator who has successfully completed the DEAC-required [Online Evaluator Training Tutorial](http://www.deactraining.org/tutorials/DEAC102).

The DEAC readiness assessment process is designed to determine whether, based on the totality of the information the institution provides to the independent reviewer, the institution meets a range of baseline eligibility requirements and appears “ready enough” to successfully proceed through a full accreditation evaluation and comprehensive on-site visit. The readiness assessment process also serves as a checkpoint to preclude a waste of the institution’s and DEAC’s resources in situations where an application for accreditation is unlikely to be successful. The readiness assessment report provides the applicant institution with guidance on the actions necessary to prepare for the comprehensive on-site visit.

An initial applicant submits its Self-Evaluation Report (SER) and Exhibits, accompanied by the readiness assessment fee (see *DEAC Accreditation* *Fees* document), within 60 days of the date DEAC accepts the institution’s application for accreditation. The institution submits the materials in accordance with DEAC’s *Guidelines for Electronic Submissions*. The Readiness Assessment Report is provided to the institution within 12-15 weeks of receiving the readiness assessment fee, Self-Evaluation Report, and Exhibits.

# Readiness Assessment Guidelines for Evaluators

If the institution substantially meets DEAC’s accreditation standards as presented and evaluated through the Readiness Assessment Compliance Assessment form, the institution is “Deemed Ready” to host an on-site visit.

If the institution does not substantially meet DEAC’s accreditation standards as presented and evaluated through the Readiness Assessment Compliance Assessment form, the institution is “Deemed Not Ready” to host an on-site visit.

DEAC Readiness Findings Guidelines:

* **Deemed Ready:** The institution receives a letter from DEAC indicating that it is deemed ready to continue the accreditation process. The letter also provides guidance to the institution on where its operations and SER responses need to be strengthened, expanded, or revised in order to increase the likelihood of a successful accreditation evaluation and on-site visit. The letter contains an overview of the accreditation process, provides information on next steps including curriculum review, and indicates that the DEAC director of accreditation will coordinate with the institution to schedule the dates for the on-site evaluation.
* **Deemed Not Ready (Second Submission):** The institution receives a letter from DEAC indicating that it is not deemed ready to continue the accreditation process. The institution has six months to submit a complete updated SER including all supporting exhibits incorporating the evaluator’s comments and recommendations. If, based on the revised SER, the independent DEAC-appointed evaluator deems the institution ready to continue the accreditation process, the institution will begin the curricular review process required for the full evaluation by submitting its curricula upon request by DEAC staff for review not to exceed three months. The institution must also submit a revised SER to the on-site evaluation team at least five weeks prior to the scheduled on-site visit.
* **Deemed Not Ready (Third Submission):** If the institution is not deemed ready after the second submission, the institution has another six months to revise and submit a new SER incorporating the evaluator’s comments and recommendations. The third submission is reviewed and evaluated by an independent readiness assessment evaluator appointed by DEAC, who completes the readiness assessment based on the revised SER and the results of a virtual readiness assessment visit. A determination that the institution is not ready is final; however, the institution can reapply for initial accreditation after one year.

# Readiness Assessment Compliance Assessment Form Instructions for Evaluators

Readiness assessment evaluators use the readiness assessment form to review initial applicant institutions and determine, based on compliance with DEAC accreditation standards, whether they are “Deemed Ready” or “Deemed Not Ready” to undergo a comprehensive on-site visit.

The questions on the readiness assessment form are designed to assist the evaluator in determining whether the initial applicant institution substantially meets the intent of DEAC accreditation standards. The readiness assessment evaluator details the assessment of the initial applicant institution by marking the appropriate response check box and by including corresponding comments (including SER page numbers and exhibit numbers) in the section of the form following each standard.

The readiness assessment evaluator provides this evidenced feedback to the initial applicant institution to assist in strengthening its documentation, processes, and procedures in advance of a comprehensive on-site visit. The readiness assessment evaluator considers whether the DEAC accreditation standards are “Evident,” “Emerging,” or “not Evident” based on a focused review of the documents submitted by the initial applicant institution.

DEAC Standards Compliance Findings Guidelines:

* **DEAC Standard is Evident:** The institution demonstrates compliance with the intent of the DEAC accreditation standard or core component.
* **DEAC Standard is Emerging:** The institution demonstrates compliance with some, but not all, of the elements contained in the DEAC accreditation standard or core component.
* **DEAC Standard is Not Evident:** The institution did not demonstrate compliance with the majority of the elements contained in the DEAC accreditation standard or core component.

The Readiness Evaluator should provide clear and concise descriptions within the “Comments” section of the report to support each determination that a standard is evident, emerging, or not evident. If a standard is evident, the Readiness Evaluator may want to consider highlighting within the Comments section the processes and procedures the institution followed that evidenced the Standard. If a standard is emerging or not evident, the Readiness Evaluator needs to adequately describe why this decision was reached and refer, as appropriate, to narrative sections and exhibits within the SER that support the determination.

The Readiness Evaluator must also indicate the required actions necessary for the institution to demonstrate compliance with standards where evidence is emerging or where standards are not evident. Each required action must be tied back to an accreditation standard or core component.

Example: DEAC Accreditation Standard [Insert #] requires [Insert element of the standard that is in question]. [Insert name of institution] needs to [insert the action necessary by the institution to demonstrate compliance with the accreditation standard.]

Evaluators must review institutions based only on the DEAC accreditation standards. Any recommendations beyond the scope of the accreditation standards should be provided under “Suggestions.”

# Readiness Assessment Compliance Assessment Report

Name of Institution: Enter name of Institution.

Date of Readiness Assessment Report: Click or tap to enter a date.

Readiness Assessment Evaluator Finding: Choose an item.

**Readiness Assessment:** This readiness assessment evaluator determined that Enter the name of the applicant institution Choose an item. to undergo a full initial on-site accreditation visit by a team representing the Distance Education Accrediting Commission.

**Important Note to Institutions**: The readiness assessment process is intentionally less rigorous and less comprehensive than the full accreditation evaluation. The readiness assessment report is a helpful resource in preparing to undergo the curricular review and comprehensive on-site visit, but it does not cover all aspects or issues that will be addressed in the full accreditation evaluation.

A “deemed ready” designation is not a guarantee that accreditation will be awarded. The on-site team, subject matter specialists, or the DEAC may discover and report other findings, required actions, or conditions that lead to accreditation being denied.

The on-site team will have access to this and any future readiness assessment reports prior to the on-site visit.

**Institutional Overview:** Provide an overview of the initial applicant institution including: founding, organizational structure, legal form and governance, target student population, status of state authorization, other accreditations (if any), and a list of the degree and certificate online/hybrid programs offered.

**Exhibits 1-4:** Provide detailed feedback on Exhibits 1-4. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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.

# Accreditation Standards

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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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution present its mission statement? |  |  |  |
| Did the institution describe how the mission establishes the institution’s identity within the educational community? |  |  |  |
| Did the institution describe how its mission guides the development of educational offerings? |  |  |  |
| Does the mission communicate the institution’s purpose and its commitment to providing quality distance educational offerings? |  |  |  |
| Is the institution’s mission appropriate to the level of study offered? |  |  |  |
| **Standard I.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 administrative and academic leadership team, as well as representative members of the institution’s faculty, shall review the mission on a regular basis to determine whether the mission should be amended and how the institution is performing against the objectives set by its mission statement. The published mission statement is readily accessible to students, faculty, staff, other stakeholders, and the public.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe the procedures followed by leadership and faculty representatives to regularly review the mission and its performance against mission-aligned objectives? |  |  |  |
| Did the institution explain how often the mission is reviewed by leadership and faculty representatives? |  |  |  |
| Did the institution provide meeting minutes or other documentation that provided supporting evidence that the mission is regularly reviewed? |  |  |  |
| Did the institution identify who is responsible for ensuring that the mission is readily accessible to students, faculty, staff, other stakeholders, and the public? |  |  |  |
| Did the institution describe where the mission is published to demonstrate that it is readily accessible to students, faculty, staff, other stakeholders, and the public? |  |  |  |
| **Standard I.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 5:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: 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. The owners, governing board members, officials, and administrators are knowledgeable and experienced in one or more aspects of education administration, finance, and the design and delivery of academic programs and related student services within a distance learning model. 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 appropriate to their position and have the ability to oversee institutional operations consistent with the institution’s mission and program offerings.

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| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators knowledgeable and experienced in educational administration? |  |  |  |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators sufficiently knowledgeable and experienced to ensure quality that financial practices are in place to ensure institutional stability? |  |  |  |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators sufficiently knowledgeable and experienced to ensure quality design and delivery of academic programs and student services? |  |  |  |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators sufficiently knowledgeable and experienced to ensure quality educational offerings delivered via distance education? |  |  |  |
| Does the institution have processes and policies that clearly delineate the duties and responsibilities of the owner(s), governing board members, chief executive officer, and top institution administrators? |  |  |  |
| Does the institution verify that all individuals in leadership and managerial positions are qualified by education and experience, as appropriate to their respective positions? |  |  |  |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators remain current within the disciplines offered by the institution and its educational community? |  |  |  |
| **Standard II.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 6:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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, Administrators, and Other Officials**

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’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 mistreatment of consumers. The institution’s owners, governing board members, officials, and administrators shall comply with the institution’s policies and procedures governing conflicts of interest and other applicable rules of conduct.

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators possess sound reputations and records of integrity? |  |  |  |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators practice ethical conduct in their professional activities, business operations, and business relations? |  |  |  |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators comply with the institution’s policies and procedures governing conflicts of interest and other applicable rules of conduct? |  |  |  |
| Is the institution’s name free from any association with activity that could damage the reputation of the DEAC accrediting process, such as illegal actions, fraud, unethical conduct, or mistreatment of consumers? |  |  |  |
| Were any owner(s), governing board members, chief executive officer, or top institution administrators debarred by federal or state authorities from participating in any funding programs? |  |  |  |
| Did the institution affirm that it will promptly notify DEAC of any investigative, enforcement, legal, or prosecutorial actions which may be initiated against the institution, its owners, governing board members, officials, and administrators and that 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? |  |  |  |
| **Standard II.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 a written plan that describes the process that it follows to sustain operations in the event a leadership succession is necessary. The plan identifies specific people, committees, or boards responsible for carrying out 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 the plan on an annual basis and revises as needed.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution’s succession plan identify events that would initiate a succession of leadership? |  |  |  |
| Did the institution identify the leadership, administrators, staff, committees, or boards responsible for carrying out its operations during the transition period? |  |  |  |
| Does the institution’s business continuity structure ensure that students’ education and services will not be disrupted during the transition period? |  |  |  |
| Are the business continuity procedures structured for immediate implementation, if necessary? |  |  |  |
| Is the institution’s succession plan reviewed and revised, as necessary, on an annual basis, as evidenced by meeting minutes or similar mechanism? |  |  |  |
| Does the institution involve appropriate individuals in reviewing and revising the succession plan? |  |  |  |
| **Standard II.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 7:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Maintaining Eligibility for Accreditation**

The institution maintains its eligibility for accreditation and is properly licensed, authorized, exempted, or approved by all applicable state education institutional authorizations (or their equivalent for non-U.S. institutions). Exemptions from state law are supported by state-issued documentation or by statutory language for that jurisdiction.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how it is properly licensed, authorized, exempted, or approved by all applicable state education institutional authorizations (or their non-U.S. institutional equivalent)? |  |  |  |
| Did the institution provide its DEAC State Authorization Form and documentation of its state licensures and authorizations? |  |  |  |
| Did the institution describe any exemptions from state law that it has determined, and did it provide the state-issued documentation or statutory language used to determine its exemption? |  |  |  |
| **Standard II.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Institutional Planning and Effectiveness

1. **Mission Achievement**

The institution plans and implements comprehensive processes with clearly defined metrics and criteria to monitor effectiveness of all aspects of the institution’s operations against the institution’s mission and any initiatives identified in the strategic plan. The institution shares appropriate information from the data gathered with relevant stakeholder groups.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately monitor and measure operational effectiveness to verify alignment of institutional activities with its mission statement? |  |  |  |
| Did the institution provide the metrics and criteria it uses to measure achievement of its mission? |  |  |  |
| Did the institution adequately describe how the achievement of these metrics and criteria demonstrate that it is effectively carrying out its mission? |  |  |  |
| Did the institution identify who is responsible for documenting the institution’s achievement of its mission? |  |  |  |
| Did the institution describe processes used to seek input from relevant groups regarding the extent to which it achieves its mission? |  |  |  |
| Did the institution provide samples of the type of data collected for review that is relevant to its identified metrics? |  |  |  |
| Did the institution describe how it shares information on the achievement of its mission with relevant groups? |  |  |  |
| Did the institution describe how the mission achievement information is incorporated into improvement planning? |  |  |  |
| **Standard III.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 implements a strategic plan utilizing a systematic process for the achievement of goals that support its mission. The institution’s planning processes involve all areas of the institution’s operations in developing strategic initiatives and goals by evaluating external and internal trends. Data is used to identify areas of weakness and opportunities for improvement, development, and growth. The plan helps institutions set priorities, manage resources, and set goals for future performance.

The strategic plan addresses, at a minimum, finances, academics, technology, admissions, marketing, personnel, and institutional sustainability and includes measurable action plans that lead to mission achievement. The plan identifies the individuals responsible, timelines for completion, and the financial resources required. The institution reviews the strategic plan at least annually and reports achievement of progress to its stakeholders.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how its strategic planning efforts guide its pursuit of achieving its goals in support of its mission? |  |  |  |
| Did the institution provide a copy of its strategic plan? |  |  |  |
| Did the institution provide evidence of how it seeks input from internal and external stakeholders as a means of enhancing its strategic planning process? |  |  |  |
| Did the institution describe how the input received from internal and external stakeholders is used in its strategic planning process? |  |  |  |
| Did the institution identify areas for improvement via a SWOT Analysis (strengths, weaknesses, opportunities, and threats) or other means of evaluation?  [Note: A SWOT analysis is not specifically required, provided that the institution appropriately identified areas of weakness and opportunities for improvement through other evaluative processes or means.] |  |  |  |
| Does the institution’s strategic plan adequately identify proactive initiatives to address its identified areas for improvement and opportunity? |  |  |  |
| Does the institution’s strategic plan address the following: financial stability; development of educational offerings; integration of technology to enhance educational offerings; effective and accurate admissions and marketing activities to promote institutional sustainability; and professional development of leadership, faculty, and staff? |  |  |  |
| Did the institution describe the metrics that guide and measure the achievement of its strategic planning goals and objectives? |  |  |  |
| For each strategic initiative, did the institution identify the individual(s) responsible and timeline(s) for completion as well as the financial resources required to pursue its achievement? |  |  |  |
| Did the institution describe its annual strategic plan review process and how it reports achievement of progress to relevant stakeholders? |  |  |  |
| **Standard III.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 8:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 Effectiveness**

The institution develops a plan and implements a systematic and ongoing process to evaluate the content and delivery of its educational programs, its provision of student support services, and the effectiveness of its supporting infrastructure and staff operations. The institution engages in sound research practices; collects and analyzes quantitative and qualitative evidence about its effectiveness; and develops and implements action plans that are used to improve operations, academic achievement, educational technologies, and student services.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe its efforts to evaluate institutional effectiveness and implement action plans for improvement? |  |  |  |
| Did the institution describe its research practices and its data collection and analysis processes? |  |  |  |
| Did the institution provide examples of both quantitative and qualitative data collected and analyzed for evaluating institutional effectiveness? |  |  |  |
| Did the institution provide the key indicators that it uses to measure its effectiveness and to determine if improvements are needed? |  |  |  |
| Are the institution’s key indicators and the data collected adequate to measure effectiveness and inform necessary improvements? |  |  |  |
| Did the institution describe and provide examples of improvements to its educational programs based on the data collected and analyzed from its research? |  |  |  |
| Did the institution describe and provide examples of improvements to its student support services based on the data collected and analyzed from its research? |  |  |  |
| Did the institution describe and provide examples of improvements to its technological infrastructure and staff operations based on the data collected and analyzed from its research? |  |  |  |
| Did the institution describe how its institutional effectiveness programs and data are reviewed to determine achievement of initiatives? |  |  |  |
| **Standard III.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 8:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Academic Achievement

1. **Student Learning Outcomes**

Student learning outcomes are clearly defined, simply stated, and measurable and define success for students who are reasonably capable of completing the educational offering.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how it develops student learning outcomes (including program- and course-level outcomes)? |  |  |  |
| Does the institution’s development process adequately verify that student learning outcomes are measurable and reasonably attainable? |  |  |  |
| Does the institution’s development process adequately verify that student learning outcomes are current and relevant based on research, comparison, subject matter experts, and advisory council input? |  |  |  |
| Did the institution provide curriculum maps? |  |  |  |
| Did the institution describe how course outcomes are appropriately mapped to program outcomes? |  |  |  |
| **Standard IV.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 9:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Direct Measures**

The institution evaluates student achievement using student outcome indicators (e.g., completion rates) and other measures that it determines to be appropriate relative to its mission and educational offerings, including post-completion measures. The institution maintains systematic and ongoing processes for assessing student achievement, analyzes aggregated and disaggregated 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. Data on student achievement is collected on a continuous basis and evaluated annually.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution provide its outcomes assessment plan? |  |  |  |
| Did the institution describe how it collects student outcomes data, as appropriate to its mission and educational offerings? |  |  |  |
| Does the institution have adequate systematic procedures for collecting outcomes assessment data? |  |  |  |
| Does the institution identify direct measures (e.g., assignment, examination, or assessment) that provide the necessary information it uses to measure and determine if students are achieving program- and course-level outcomes? |  |  |  |
| Did the institution identify benchmarks or standards it uses to measure whether students are achieving the stated student learning outcomes? |  |  |  |
| Does the institution use data results of direct measures to improve and enhance its educational offerings and support services? |  |  |  |
| Does the institution use consistent processes to monitor student graduation and completion rates? |  |  |  |
| Did the institution provide adequate evidence that it meets DEAC’s most recently published benchmarked standards for graduation and completion rates? |  |  |  |
| If the institution does not meet DEAC’s most recently published benchmarked standards for graduation and completion rates, did it provide adequate context for its current rates, within the context of the institution’s mission and the profile of students being served? |  |  |  |
| Does the institution use consistent processes to monitor student persistence and retention, as applicable to the institution’s respective program length(s)? |  |  |  |
| Does the institution adequately monitor post-completion measures, as applicable relative to the institution’s mission and educational offerings? |  |  |  |
| For programs that indicate a specific career or other benefit as an outcome or prepare students for state licensure/certification examination required for entering a profession, does the institution use consistent processes for collecting data on student achievement of that outcome(s)? |  |  |  |
| For programs that indicate job placement, did the institution provide evidence of employer acceptance of graduates? |  |  |  |
| For programs that indicate a specific career or other benefit as an outcome, does the institution gather and utilize information from employers about future employment prospects for graduates of these programs? |  |  |  |
| **Standard IV.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 10:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Indirect Measures**

The institution systematically seeks student, alumni, and employment community input to evaluate and improve curricula, instructional materials, method of delivery, and student services. The institution regularly collects evidence that currently enrolled students are satisfied with the administrative, educational, and support services provided.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution provide evidence that it systematically seeks student and alumni input as one basis for evaluating and improving curricula, instructional materials, method of delivery, and student services?  [Note: Lack of alumni engagement does not constitute non-compliance, provided that the institution has processes in place to seek such input.] |  |  |  |
| If applicable, relative to the institution’s mission and educational offerings, did the institution provide evidence that it systematically seeks employment community input as one basis for evaluating and improving curricula, instructional materials, method of delivery, and student services?  [Note: Lack of employment community engagement does not constitute non-compliance, provided that the institution has processes in place to seek such input.] |  |  |  |
| Does the institution identify indirect measures that it uses to measure student satisfaction? |  |  |  |
| Did the institution identify benchmarks or standards that it uses to measure student satisfaction? |  |  |  |
| Does the institution use data collected from indirect measures to improve and enhance its educational offerings and student support services? |  |  |  |
| **Standard IV.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 11:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Academic Program Requirements

1. **General Program Requirements**

The institution’s programs are aligned with its mission. Program content, student learning outcomes, and standards of student performance are appropriate to the academic discipline and level of the credential conferred. Entry and completion requirements for each program are clearly defined and consistent with commonly accepted program expectations of the authority for awarding the credential. Program length for degree programs must adhere to the following minimum standards:

1. Associate degree – minimum 60 semester hours or equivalent.
2. Bachelor’s degree – minimum 120 semester hours or equivalent.
3. Master’s degree – minimum 30 semester hours or equivalent beyond the bachelor’s degree.
4. First Professional degree (at any level) – minimum 50 semester hours or equivalent beyond the bachelor’s degree.
5. Applied doctorate – minimum 48 semester hours or equivalent beyond the master’s degree.
6. Research doctorate – minimum 60 semester hours or equivalent beyond the master’s degree.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how its program offerings align with its mission? |  |  |  |
| Are the institution’s program contents appropriate to the type and level of the respective credential conferred for each program (e.g., non-degree, undergraduate degree, graduate degree, and/or doctoral degree)? |  |  |  |
| Are the institution’s student learning outcomes appropriate to the type and level of the respective credential conferred for each program (e.g., non-degree, undergraduate degree, graduate degree, and/or doctoral degree)? |  |  |  |
| Are the institution’s standards of student performance at appropriate levels of academic rigor, consistent with the type and level of the respective credential conferred for each program (e.g., non-degree, undergraduate degree, graduate degree, and/or doctoral degree)? |  |  |  |
| Did the institution describe how it verifies that entry and completion requirements (e.g., capstone, thesis, or other culminating project requirements as applicable) for each program are clearly defined and consistent with commonly accepted program expectations at other appropriately accredited institutions?  [Note: Applicable entry and completion requirements may also come from various regulatory bodies such as state boards and/or federal or international board of educations of similar. If an institution provides evidence that it meets the requirements of applicable regulatory bodies, a lack of additional evidence of alignment with appropriately accredited institutions does not constitute non-compliance.] |  |  |  |
| If applicable, do the institution’s degree programs align with the minimum length requirements of Standard V.A.1-6? If no, see question below. |  |  |  |
| Did the institution indicate that it offers a program(s) where the field of study has commonly accepted and established minimum length requirements that differ from Standard V.A.1-6 minimums? If yes, did it describe how the program(s) are comparable to other programs offered at accredited institutions? |  |  |  |
| **Standard V.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 12:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **General Education Requirements for Undergraduate Degrees**

Institutions set clear expectations regarding general education requirements for undergraduate programs consistent with the level of education and academic discipline. General education content for undergraduate programs conveys broad knowledge and intellectual concepts to students that equip them for lifelong learning. General education must include outcomes related to written and oral communication, quantitative reasoning, information literacy, critical thinking, natural and physical sciences, social and behavioral sciences, and the humanities.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution clearly describe how general education outcomes are included within the undergraduate degree structure? |  |  |  |
| Are the institution’s general education requirements at a level of academic rigor appropriate to the program level(s) and discipline(s) offered? |  |  |  |
| Does the institution’s general education content convey broad knowledge and intellectual concepts to students that equip them for lifelong learning? |  |  |  |
| Do the institution’s requirements for each undergraduate degree program offered include each of the following general education outcomes: written and oral communication, quantitative reasoning, information literacy, critical thinking, natural and physical sciences, social and behavioral sciences, and the humanities?  [Note: Each outcome requirement may be met through specific general education course(s) and/or by identified course learning outcomes included in core course requirements.] |  |  |  |
| If the institution includes general education outcomes within core courses, does the institution’s curriculum map for that program explicitly identify those outcomes as applicable to general education? |  |  |  |
| **Standard V.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Alternative Program Structures**

Institutions may offer alternative program structures appropriate to the institution’s mission. Such program structures may include direct assessment (competency-based) programs, joint degrees, dual degrees, double majors, and advanced standing degree enrollment as defined in the glossary. Alternative degree plans must meet all student learning outcomes and DEAC’s standards of accreditation, including the requirement that the majority of each program be offered through distance education.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have any programs with alternative program structures? |  |  |  |
| For each applicable program, did the institution describe how the programs are appropriate to the institution’s mission? |  |  |  |
| For each applicable program, did the institution describe how the programs align with applicable DEAC glossary definitions or, if they do not, did the institution describe the program requirements and provide sample evidence to demonstrate compliance with DEAC’s standards of accreditation? |  |  |  |
| For each applicable program, is the majority of the program offered through distance education?  [Note: Each program must be at least 51 percent offered through distance education. Individual courses may exceed this percentage, provided that the program as a whole is at least 51 percent offered through distance education.] |  |  |  |
| **Standard V.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Program Advisory Council(s)**

The institution maintains an Advisory Council of individuals external to the institution with expertise for each major group of programs or major subject matter disciplines it offers to inform curricular development decisions and align program content to current practices. Institutional personnel may participate as liaisons to Advisory Councils.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution maintain an Advisory Council of external individuals with expertise for each major group of programs or major subject matter disciplines it offers? |  |  |  |
| Did the institution describe how the feedback of its Advisory Council(s) informs curricula development decisions and verifies that program content aligns with current practices? |  |  |  |
| Did the institution provide evidence of Advisory Council meetings and feedback received? |  |  |  |
| **Standard V.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 13:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Curriculum Development

1. **Program Curricula Development**

Institutions have a documented process for curriculum development that clearly articulates the principles of learning and pedagogical foundations used to frame the program. The institution’s curricula are supported by reliable research and align with commonly accepted educational practices within the fields of practice. Qualified faculty and academic leadership hold the primary responsibility for all program content and instructional design and supervise staff, third-party providers, or consultants used in curricula development. Program curricula are reviewed on a periodic basis by academic leadership, program leadership, program faculty, and the Program Advisory Council. The review integrates program performance data collected on an annual basis with respect to student progression; student learning outcomes; faculty and student feedback; and content currency, accuracy, and comprehensiveness.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe its curriculum development process? |  |  |  |
| Is the institution’s curriculum development process adequately documented via its Curriculum Development Manual and/or other submitted evidence? |  |  |  |
| Did the institution describe the principles of learning and pedagogical foundations used throughout its curriculum development process? |  |  |  |
| Is the institution’s curricula appropriately supported by reliable research and align with commonly accepted educational practices, as applicable to respective curriculum’s fields of practice? |  |  |  |
| Are the institution’s curriculum content developers (e.g., subject matter experts) appropriately qualified? |  |  |  |
| Did the institution provide evidence of curriculum content developers’ qualifications? |  |  |  |
| Are the institution’s distance education instructional designers appropriately qualified? |  |  |  |
| Did the institution provide evidence of instructional designers’ qualifications? |  |  |  |
| If the institution engages non-faculty staff and/or third-party providers or consultants in curricula development, did the institution describe how they are appropriately supervised?  [Note: If yes, further exploration into any contract and DEAC approval may be necessary. See applicable requirements in the DEAC Handbook, Part II.] |  |  |  |
| If the institution engages non-faculty staff and/or third-party providers or consultants in curricula development, did the institution provide evidence of appropriate supervision mechanisms via contracts or similar documentation? |  |  |  |
| Did the institution describe a program review process that adequately ensures that curricula and instructional materials for each program remain current, accurate, and comprehensive? |  |  |  |
| Does the institution’s program review process involve appropriate personnel and academic leaders, include a clear process review schedule, and identify data that is collected, synthesized, and used? |  |  |  |
| Does the institution have a process in place to identify and correct any content errors in curricula and instructional materials between regularly scheduled program reviews? |  |  |  |
| **Standard VI.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 14:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Instructional Design and Materials**

All curricula and instructional materials are designed for the program’s distance learning delivery modality by qualified individuals and grounded in instructional design principles. Instructional design considers how students learn, the nature and accessibility of the materials, and methods deemed most effective to help students learn in specific delivery modalities. Courses integrate access to learning materials and resources. Courses include instructions and suggestions on how to study and how to use the instructional materials to learn effectively and efficiently. Syllabi are aligned with course content and are structured to direct course learning experiences and activities.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution appropriately define its model for distance education delivery as either correspondence, online, or hybrid (e.g., a combination of online learning with in-residence components), or an appropriate alternative program structure? |  |  |  |
| Are the institution’s curricula and instructional materials grounded in distance learning instructional design principles, in alignment with the nature of the program and the institution’s specific delivery modalities? |  |  |  |
| Are students able to efficiently access learning materials, as appropriate for the nature of the program(s) and the institution’s delivery modalities? |  |  |  |
| Do the institution’s courses appropriately integrate access to learning materials and resources? |  |  |  |
| Does the institution provide appropriate study and resource navigation instructions for students? |  |  |  |
| Does the institution provide appropriate instructions for accessing and using instructional materials? |  |  |  |
| Does the institution have an adequate process to ensure that syllabi are aligned with course content and are structured to direct course learning experiences and activities? |  |  |  |
| **Standard VI.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 and calculate the chosen academic unit of measurement. The framework for academic units must be supported by research and consistent with the program learning outcomes. Academic units are measured by credit hours or competencies. Academic unit measurements for all delivery modalities and program types must clearly show that each program is delivered with at least 51 percent distance education. 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. If academic units are measured in 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.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution provide its policy for determining and assigning academic units of measurement? |  |  |  |
| Is the institution’s framework(s) for academic unit measurement appropriately supported by research and consistent with program learning outcomes? |  |  |  |
| Did the institution adequately describe how academic unit measurement verifies that all programs are delivered through at least 51 percent distance education?  [Note: Each program must be at least 51 percent offered through distance education. Individual courses may exceed this percentage, provided that the program as a whole is at least 51 percent offered through distance education.] |  |  |  |
| Is the institution’s process for measuring and documenting the amount of time it takes the average student to achieve the learning outcomes (as a means of assigning academic units of measurement) adequate, based on accepted best practices? |  |  |  |
| Does the institution follow adequate processes for verifying and documenting that all academic units of measurement are appropriately assigned? |  |  |  |
| Are all assigned academic units of measurement appropriate, based on the level and type of educational offering? |  |  |  |
| **Standard VI.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 15:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Credit Hour Definition**

Semester and quarter credit 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 credit or 30 hours of student work for one quarter credit. One credit/semester hour is 15 hours of academic engagement and 30 hours of preparation. One quarter hour credit is 10 hours of academic engagement and 20 hours of preparation.

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| **Questions** | **Yes** | **No** | **N/A** |
| For programs measured in credit hours, are the institution’s definition and calculations equivalent to commonly accepted and traditionally defined units of academic measurement, as defined by DEAC Standard VI.D.? |  |  |  |
| **Standard VI.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Learning Materials, Resources, and Research Support

1. **General Learning Resources**

Institutional learning resources include general materials or resources that are available to students outside individual class environments. Learning materials and resources are designed to adequately support educational offerings in meeting learning outcomes.

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution's learning resources encompass materials beyond what is provided in individual class settings, tailored to the program types, levels, and modalities offered? |  |  |  |
| Do the institution's overall learning materials and resources effectively support its educational programs, facilitating students in achieving their learning outcomes? |  |  |  |
| **Standard VII.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Course Level Learning Resources**

In-course learning resources for faculty and students are available and appropriate to the level and content of the course within the scope of the program offering. Program designers and faculty use effective teaching aids and learning resources, including educational media and supplemental instructional aids, when delivering courses and teaching students. The institution provides faculty and students with access to all relevant learning resources, materials, or related services that are appropriate for the achievement of course learning outcomes.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have appropriate in-course learning materials that adequately support the educational offerings? |  |  |  |
| Are in-course learning resources available and appropriate to the level and scope of educational offerings, in support of achievement of course learning outcomes? |  |  |  |
| Do program designers and faculty appropriately integrate teaching aids, learning resources, educational media, and supplemental instructional aids when delivering courses and teaching students? |  |  |  |
| Are faculty learning resources available and appropriate to the level and scope of the educational offerings? |  |  |  |
| **Standard VII.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Library and Research Support**

Staff or contracted librarians must support the learning, teaching, and research functions of institutions, as well as provide overall support to the institution’s curriculum as applicable to the level and content of the institution’s academic programs. A process is in place to select, acquire, organize, and maintain institutional learning materials and resources for each program.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have library resources and collections available to students, as applicable to the level and content of its academic programs? |  |  |  |
| Are on-staff or contracted library personnel adequately available for student support? |  |  |  |
| Are on-staff or contracted library personnel appropriately qualified to support the level and scope of the institution’s program offerings? |  |  |  |
| Do the institution’s library resources support the institution’s learning, teaching, and research functions, as applicable to the level and content of its academic programs? |  |  |  |
| Does the institution have an adequate process for selecting, acquiring, organizing, and maintaining learning materials and resources for each degree discipline and level? |  |  |  |
| **Standard VII.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Evaluation, Review, and Revision.**

The quality, adequacy, currency, and accuracy of institutional learning resources, technologies, library resources, and in-course learning resources for each program are reviewed and evaluated at least annually. The review is conducted by institutional academic leadership and program leadership, with input from faculty and students. The process and applicable resources are revised as appropriate, based on each review.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how learning resources, technologies, library resources, and in-course learning resources are regularly reviewed and updated to ensure that they continue to meet student and faculty needs? |  |  |  |
| Is the review and update process conducted by academic and program leadership, with input from faculty and students? |  |  |  |
| Is the review process and resources selected revised over time, based on lessons learned during prior reviews? |  |  |  |
| **Standard VII.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Academic Delivery

1. **Curricula Delivery**

All curricula and instructional materials are developed in alignment with the institution’s mission and delivery modality. Regardless of methodology, delivery supports interactions with faculty in synchronous or asynchronous learning.

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| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s curricula and instructional materials appropriately developed to align with the institution’s delivery modalities? |  |  |  |
| Are curricula delivered through means that support student interactions with faculty, as appropriate for the institution’s synchronous or asynchronous learning modality(ies)? |  |  |  |
| **Standard VIII.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Supporting Academic Technologies**

The institution uses technology appropriate to its modality and institutional context to support the delivery of its educational programs. This includes not only technology that delivers course materials and content, but also technology that (1) supports communications between students and faculty; (2) monitors student progress and achievement; (3) provides access to other academic resources, such as online libraries and third-party programs; (4) offers readily accessible channels for students to communicate questions, complaints, and concerns to applicable faculty or institutional staff; (5) protects the integrity of academic programs, testing, student work, and student communications; and (6) otherwise supports the collection of data necessary for the institution to evaluate its operations and performance.

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| **Questions** | **Yes** | **No** | **N/A** |
| Are students adequately informed of the institution’s minimum technology requirements prior to admission? |  |  |  |
| Does the institution use technology that is appropriate to its modality and institutional context, to support the delivery of its educational programs? |  |  |  |
| Does the technology in use adequately support communication between students and faculty? |  |  |  |
| Does the technology in use adequately monitor student progress and achievement? |  |  |  |
| Does the technology in use provide adequate access to academic resources outside of individual courses, such as online libraries and third-party programs? |  |  |  |
| Does the technology in use offer readily accessible channels for students to communicate questions, complaints, and concerns to applicable faculty or staff? |  |  |  |
| Does the technology in use adequately protect the integrity and security of academic programs, testing, student work, and student communications? |  |  |  |
| Does the technology in use adequately support the collection of data necessary for the institution to evaluate its operations and performance? |  |  |  |
| **Standard VIII.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 16:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Academic Leadership and Staffing

1. **Academic Leadership**

The institution provides academically qualified and experienced leadership to direct and oversee the effective delivery of its educational offerings using distance learning models. Academic leadership is responsible for the quality of program and student outcomes, as well as for the selection, training, continued quality, and development of faculty.

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s academic leaders possess the academic qualifications and experience to direct and oversee the effective distance education delivery of educational offerings? |  |  |  |
| Does the institution’s academic leadership include individuals who are adequately qualified and experienced in the institution’s implemented distance learning modalities? |  |  |  |
| Did the institution describe the respective roles and responsibilities of academic leadership personnel and do they reflect an adequate academic infrastructure to provide effective distance education delivery of its educational offerings? |  |  |  |
| Are the institution’s academic leaders assigned appropriate responsibilities based on their respective qualifications and identified roles within the organization? |  |  |  |
| Are there adequate processes in place to ensure that academic leaders are responsible for and engaged in review of program quality and student outcomes? |  |  |  |
| Does the institution have appropriate processes in place for academic leadership’s selection, training, and ongoing development of faculty? |  |  |  |
| **Standard IX.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 17:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Faculty Qualifications**
2. The institution provides the appropriate number of qualified faculty to achieve program and course outcomes and provide instruction. The institution maintains faculty résumés, official transcripts, and copies of applicable licenses or credentials on file.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution provide its faculty handbook? |  |  |  |
| Are the institution’s faculty qualification requirements appropriate, in relation to the subject areas taught and the credential level of the programs offered, as evidenced by its faculty qualification policy documentation? |  |  |  |
| Does the institution employ or contract with a sufficient number of qualified faculty to provide individualized instructional service to students? |  |  |  |
| Does the institution maintain adequate documentation to demonstrate that faculty are appropriately qualified? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 18:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching in high school programs are appropriately credentialed to teach the subject and level of the courses leading to a high school diploma.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching high school program courses? |  |  |  |
| Are the qualifications for faculty teaching high school program courses consistent with accepted best practices? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching technical courses have practical experience in the field and possess current licenses/certifications as applicable.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching technical, non-degree courses? |  |  |  |
| Are the qualifications for faculty teaching technical, non-degree courses consistent with accepted best practices? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching occupational/technical associate degrees possess credentials, evidence of academic preparation, practical experience, and licensure or certifications that are appropriate to the subject field and consistent with accepted postsecondary education practices in the subject field.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies to verify that faculty teaching in occupational/technical associate degree programs possess earned credentials awarded by appropriately accredited institutions, evidence of academic preparation, and/or practical experience and licenses or certifications in the field, as appropriate to the subject field? |  |  |  |
| Are the institution’s academic preparation, practical experience, and licensure or certification requirements for faculty teaching in occupational/technical associate degree programs consistent with accepted postsecondary education best practices in the subject field? |  |  |  |
| Does the institution have appropriate procedures in place for ensuring that faculty teaching in occupational/technical associate degree programs possess adequate academic preparation, practical experience, and licensure or certifications? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching in occupational/technical associate degree programs? If so, are they appropriate? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching in undergraduate academic degree programs possess a degree at least one level above that of the program they are teaching and demonstrate expertise in the subject field they are teaching.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching undergraduate degree program courses? |  |  |  |
| Are the qualifications for faculty teaching undergraduate degree program courses consistent with accepted best practices? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching undergraduate degree program courses? If so, are they appropriate? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching in master’s degree programs possess a doctoral or terminal degree and demonstrate expertise in the subject field they are teaching.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching master’s degree program courses? |  |  |  |
| Are the qualifications for faculty teaching master’s degree program courses consistent with accepted best practices? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching master’s degree program courses? If so, are they appropriate? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching in doctoral degree/first professional degree programs possess a doctoral degree/first professional degree in a related subject field.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching doctoral degree/first professional program courses? |  |  |  |
| Are the qualifications for faculty teaching doctoral degree/first-professional program courses consistent with accepted best practices? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty teaching general education possess a master’s degree in the field or a master’s degree and 18 semester hours of education in the general education subject area.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching general education courses? |  |  |  |
| If general education outcomes are integrated into core courses, did the institution demonstrate that faculty are appropriately qualified for both roles (e.g. do assigned faculty possess appropriate degree qualifications and demonstrate expertise in the subject field they are teaching as well as the applicable, integrated general education subject area)? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching general education courses? If so, are they appropriate? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. All faculty credentials are awarded by an appropriately accredited institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have an appropriate process in place to verify that all faculty educational credentials are awarded by an appropriately accredited institution (or accepted foreign equivalent that is listed in the International Handbook of Universities)? |  |  |  |
| For faculty teaching technical, non-degree courses where faculty must possess current licenses/certifications applicable to a course or program, does the institution have an appropriate process in place to verify that all faculty licenses/certifications held are awarded by an appropriate entity and are active (if deemed necessary by the institutions policy on qualifications for faculty teaching technical, non-degree courses)? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Faculty may be assigned, in limited and exceptional cases, to teach at the undergraduate or master’s level by documented equivalency consisting of a demonstrated depth and breadth of experience in the content area. An institution that uses experiential equivalency in lieu of the required degree qualifications for faculty and other academic positions must establish and adhere to a clearly stated policy which authorizes the use of experiential equivalency only in exceptional cases and only where equivalency is demonstrated pursuant to published and objective criteria. In such cases, the institution implements:
2. a well-defined policy, with processes and procedures to evaluate the need for and assignment of faculty by equivalency; and
3. procedures that ensure that adequate oversight of teaching and learning is provided by individuals who possess degree qualifications in accordance with faculty qualifications listed in IX.B.4-6 and 8 above.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies for faculty qualification equivalency, including need evaluation and faculty assignment procedures? |  |  |  |
| Do the institution’s policies ensure that faculty qualification equivalency is only considered in limited and exceptional cases? |  |  |  |
| Does the institution require appropriate documentation to determine that a faculty member has sufficient experience, knowledge, and expertise necessary to substitute faculty qualification equivalency for the degree qualifications set forth in Standards IX.B.4-6 and 8? |  |  |  |
| Does the institution have adequate procedures in place to ensure that adequate oversight of teaching and learning is provided by individuals who possess appropriate degree qualifications as set forth in Standards IX.B.4-6 and 8? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. |

1. **Faculty Training**

All faculty must be trained in or have demonstrated experience with the principles of distance learning pedagogy. In addition, faculty shall be regularly trained in institutional policies, existing and emerging instructional approaches and techniques, and the use of instructional technology and academic resources. Faculty are evaluated on a regular basis for effectiveness in teaching and responsiveness to student needs.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately train and/or verify that faculty have experience with the principles of distance learning pedagogy in use? |  |  |  |
| Are faculty regularly trained in institutional policies, instructional approaches and techniques, and the use of instructional technology and resources? |  |  |  |
| Are faculty evaluated regularly for effectiveness in teaching and student communication responsiveness? |  |  |  |
| **Standard IX.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 19:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 Development and Scholarship**

Faculty and academic staff are provided professional development and support for scholarly pursuits aligned to the institution’s mission and level of programs offered.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have an adequate professional development and scholarship support policy for faculty and academic staff? |  |  |  |
| Does the institution document that faculty and academic staff participate in appropriate professional development based on their subject area and responsibilities? |  |  |  |
| Do the professional development opportunities and scholarship support provided align with the institution’s mission and level of programs offered? |  |  |  |
| Do the resources and materials provided to faculty and academic staff include internal and external resources, as appropriate for the institution’s mission and level of programs offered? |  |  |  |
| **Standard IX.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 20:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Academic Policies

1. **Admissions Criteria**

The institution’s admissions criteria align with its mission, program levels, and targeted student population. The admissions criteria are intended to ensure the admission of students who can reasonably be expected to successfully complete the stated educational offerings. Exceptions to admissions criteria are limited and require documentation of a clear and justifiable rationale for the exception.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s admissions policy appropriate and consistent with accepted best practices? |  |  |  |
| Do the institution’s admissions criteria align with its mission, program levels, and its target student population? |  |  |  |
| Does the institution follow an adequate process for developing admissions criteria that verify and document that prospective students can reasonably be expected to complete the stated educational offerings? |  |  |  |
| Does the institution adequately document that students meet established admissions criteria? |  |  |  |
| If the institution enrolls students who do not meet its established admissions criteria, are the institution’s policies and procedures for determining the basis for admittance adequate? |  |  |  |
| Is the institution’s documentation of admissions exceptions adequate and does it clearly indicate that students otherwise meet established admissions criteria? |  |  |  |
| Are admissions exceptions only made under limited and exceptional circumstances? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 21:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Non-Degree Programs  
   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).

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for non-degree programs? |  |  |  |
| Does the institution allow self-certification? |  |  |  |
| If the institution allows self-certification, are the policy and process followed adequate for verification? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Undergraduate Degrees  
   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]).

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for undergraduate degree programs? |  |  |  |
| Does the institution allow self-certification? |  |  |  |
| If the institution allows self-certification, are the policy and process followed adequate for verification? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Master’s Degrees   
   Applicants possess a bachelor’s degree earned from an appropriately accredited institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for master’s degree programs? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. First Professional Degrees  
   Applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for first professional degree programs? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 Doctoral Degrees   
   Applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution and relevant academic experience. The institution verifies that applicants have completed 30 graduate-level credit hours prior to admission.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for professional doctoral degree programs? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Research Doctoral Degrees Applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution and relevant academic experience. The institution verifies that applicants have completed 30 graduate-level credit hours prior to admission.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for research doctoral degree programs? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Dual Degrees   
   Institutions demonstrate that admissions criteria meet commonly accepted practices and ensure that students are adequately prepared to be successful in the educational offering.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution offer dual degrees (or “double degrees” or similar designation)? |  |  |  |
| For each dual degree offering, do the institution’s program admissions criteria meet commonly accepted practices and ensure that students are adequately prepared to be successful in the education offering? |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. |

1. **Transfer Credit**

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 may appeal transfer credit decisions using published procedures. The institution clearly discloses that the transfer of institutional credits to other institutions is at the discretion of the other institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s transfer credit policy fair and equitable? |  |  |  |
| Is the institution’s transfer credit policy appropriately published? |  |  |  |
| Is the institution’s process for students requesting transfer credit clear, adequate, and consistent with accepted best practices? |  |  |  |
| Does the institution evaluate transfer credit in a manner consistent with accepted best practices? |  |  |  |
| Does the institution maintain appropriate documentation to substantiate the award of transfer credits? |  |  |  |
| As appropriate for each program level offered, are transfer credit evaluations performed by qualified individuals with experience in evaluating transcripts and academic content equivalency? |  |  |  |
| Does the institution have a clear, published transfer credit appeal procedure? |  |  |  |
| Does the institution clearly disclose that transfer of institutional credits to other institutions is at the discretion of the receiving institution? |  |  |  |
| **Standard X.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 22:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Prior Learning Assessment**

Credit may be awarded for demonstrated learning appropriate for the level, subject, and amount of credit awarded based on the student’s prior professional/military experience, training, credit recommendation services, or other educational experiences outside of traditional academic learning consistent with CAEL’s Ten Standards for Assessing Learning (Available in Part IV, Appendix XV, DEAC Accreditation Handbook).The institution must publish its prior learning assessment policy in its catalog. Institutions maintain official documentation of the evidence of prior learning and the rationale of the instances of awarding credit for prior learning.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution award credit for prior learning? |  |  |  |
| Are the institution’s policies for assessment of prior learning appropriately published? |  |  |  |
| For each type of prior learning offered by the institution, is the process by which students are required to demonstrate/document their prior learning adequate? |  |  |  |
| Are the institution’s policies and evaluation criteria for awarding credit for prior learning fair and equitable, and is the rationale for credited awarded appropriately documented? |  |  |  |
| Is prior learning assessment performed by qualified individuals with experience in evaluating prior learning? |  |  |  |
| For educational experiences outside of traditional academic learning, are institution’s policies and procedures appropriately aligned with CAEL’s Ten Standards for Assessing Learning? |  |  |  |
| **Standard X.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 23:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. Students acknowledge in writing their receipt and review of the policies prior to beginning their first course. The institution affirms that the student who takes an assessment is the same person who enrolled in the program. The institution implements procedures to ensure that assessments will reflect a student’s own knowledge and competence in accordance with stated learning outcomes.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s student integrity and academic honesty policies adequate? |  |  |  |
| Does the institution consistently enforce its student integrity and academic honesty policies? |  |  |  |
| Does the institution require students to acknowledge, in writing, their receipt and review of student integrity and academic honesty policies prior to beginning their first course? |  |  |  |
| Does the institution adequately affirm that the student who takes the assessment is the same person who enrolled in the program and that assessment results will reflect the student’s own knowledge and competence in accordance with stated learning outcomes? |  |  |  |
| **Standard X.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 24:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 Polices**

Student academic performance is measured using published grading policies that include prompt return of accurately and consistently graded assessments that are supervised by a qualified faculty member. The institution publishes its grade scale system, policy for course extension, and information on incomplete grades.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s approach to grading adequate and consistent with accepted best practices? |  |  |  |
| Did the institution provide a link to its published grading policies and other related academic policies? |  |  |  |
| Does the institution have procedures in place to ensure that faculty (and those individuals supervised by faculty) apply the grading policy with accuracy and consistency? |  |  |  |
| Did the institution identify who is responsible for ensuring that all grading is conducted accurately and consistently? |  |  |  |
| **Standard X.E. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 25:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 (SAP) policy and discloses this policy to students. Criteria for measuring satisfactory academic progress include qualitative and quantitative standards used for evaluation of student progress. The institution takes appropriate action if students do not 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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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s satisfactory academic progress policy adequate, based on its educational offerings and mission? |  |  |  |
| Does the institution have appropriate qualitative and quantitative standards that adequately measure student progress? |  |  |  |
| Does the institution consistently enforce its satisfactory academic progress policy if a student is unable to meet minimum standards of progress? |  |  |  |
| Did the institution identify who is responsible for monitoring student progress? |  |  |  |
| Does the institution monitor and verify student progress with sufficient frequency, based on its published satisfactory academic progress policy? |  |  |  |
| Does the institution inform students of their academic progress and standing in the program at appropriate intervals? |  |  |  |
| **Standard X.F. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 26:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

Any institution that has students or faculty engage in research involving human subjects implements an institutional review board (IRB). The IRB ensures that such research studies comply with U.S. Department of Health and Human Services regulations under 45 CFR Part 56 and other applicable regulations, meets commonly accepted ethical standards, follows institutional policy, and adequately protects research participants. The IRB is responsible for approving and providing oversight on all research activities involving human subjects conducted by students, faculty, and other academic support personnel.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have students or faculty engage in research involving human subjects? |  |  |  |
| Do the institution’s policy and procedures that students and faculty follow for research involving human subjects adequately protect research participants? |  |  |  |
| Did the institution provide an adequate Institutional Review Board policy? |  |  |  |
| Does the institution have an appropriate training process for faculty and students prior to their engagement in research projects involving human subjects? |  |  |  |
| Did the institution provide appropriate certification documentation for its Institution Review Board members? |  |  |  |
| Did the institution adequately describe how its institutional review board (IRB) ensures that research studies comply with applicable regulations and meet commonly accepted ethical standards? |  |  |  |
| Does the institution have appropriate mechanisms and processes in place to ensure that the IRB has appropriate oversight over research activities conducted by students, faculty, and other academic support personnel involving human subjects? |  |  |  |
| **Standard X.G. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 27:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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: Recruitment and Enrollment

1. **Student Recruitment**

The institution demonstrates that ethical processes and procedures are followed throughout the recruitment of prospective students. The qualifications and experience of the institution’s recruitment personnel are aligned to identified roles and responsibilities. Recruitment personnel are trained in the tasks and expectations of their positions. Authorized recruitment personnel are provided with appropriate materials to perform their tasks and are routinely monitored to ensure compliance with laws applicable to the jurisdiction(s) in which the institution operates, the DEAC Code of Ethics, and institutional policy. The institution takes full responsibility for the actions of its recruitment personnel, whether internal or third party.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution follow effective processes and procedures for enrolling prospective students? |  |  |  |
| Does the institution follow ethical processes and procedures when enrolling prospective students? |  |  |  |
| Are the qualification and experience requirements for the institution’s recruitment personnel adequate for their identified roles and responsibilities? |  |  |  |
| Does the institution appropriately train student recruitment personnel in institution policies, processes, and expectations? |  |  |  |
| Are the materials provided to recruitment personnel adequate to ensure that tasks are performed ethically, consistently, and in compliance with applicable laws, DEAC standards, and institutional policies? |  |  |  |
| Does the institution have an adequate process in place to verify that recruitment materials comply with laws applicable to the jurisdiction(s) in which it operates and DEAC recruitment practice requirements? |  |  |  |
| Did the institution provide evidence that all student recruitment personnel sign the DEAC Code of Ethics? |  |  |  |
| Does the institution adequately supervise and monitor both internal and third-party student recruitment personnel? |  |  |  |
| Does the institution have adequate processes and criteria in place to evaluate both internal and third-party student recruitment personnel? |  |  |  |
| **Standard XI.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 28:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Verification of Student Identity**

Student identity verification processes begin during the enrollment and onboarding of students and continue with respect to the student’s enrollment in subsequent programs/classes.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have an adequate process for verifying student identity during admission (initial enrollment) and onboarding? |  |  |  |
| Does the institution have an adequate process for verifying student identity throughout their subsequent program/course enrollment? |  |  |  |
| **Standard XI.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 29:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

Institutions enrolling students under the compulsory school age obtain permission from responsible parties to assure that the pursuit of the educational offerings is not detrimental to any compulsory schooling.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution obtain permission from responsible parties prior to enrolling compulsory school aged students? |  |  |  |
| Does the institution follow a process for verifying and documenting that the pursuit of educational offerings by a compulsory school aged student is not detrimental to any compulsory schooling? |  |  |  |
| **Standard XI.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 are in the language of instruction and clearly identify the educational offering and the credential awarded. The agreements inform applicants 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 Checklist.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s enrollment agreements/documents in the language of instruction? |  |  |  |
| Do the institution’s enrollment agreements/documents clearly identify the education offering and the credential awarded upon program completion? |  |  |  |
| Do the institution’s enrollment agreements/documents verify that each applicant is fully informed of the rights, responsibilities, and obligations of both the student and the institution prior to the applicant’s signature? |  |  |  |
| Does the institution comply with the DEAC enrollment agreement disclosures checklist? |  |  |  |
| Does the institution follow an adequate process for accepting and processing enrollment agreements? |  |  |  |
| Does the institution appropriately incorporate any payment contract into the enrollment agreement/documents, or is any payment contract provided in conjunction with the enrollment agreement completion process? |  |  |  |
| **Standard XI.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 30:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 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.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately disclose to prospective students prior to enrollment all costs associated with the education provided? |  |  |  |
| Do all costs associated with the education provided include tuition, educational services, textbooks, and instructional materials, as well as application, registration, authentication, proctoring (if applicable), technology access, and library or any other required service fees? |  |  |  |
| **Standard XI.E. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Scholarships**

Scholarships are awarded either for merit or based on need. Merit-based scholarships must be based on definable achievement at the time of enrollment or within the program of study. Merit-based scholarships are evaluated by qualified individuals using an institution- approved rubric. Need-based scholarships must be based on a discernable and consistent economic standard. Scholarships must indicate the actual reduction in the costs that would otherwise be charged by the institution.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution offer any scholarships that are internally awarded/administered? |  |  |  |
| Do any merit-based scholarships offered include clearly defined achievement application criteria? |  |  |  |
| Are merit-based scholarship applications evaluated by qualified individuals using an institution-approved rubric? |  |  |  |
| Are merit-based scholarship rubrics appropriately defined to guide consistent and fair award decision making? |  |  |  |
| Do any need-based scholarships offered include clearly defined and consistent economic application criteria? |  |  |  |
| Do scholarship materials document the actual reduction in program costs that would otherwise be charged by the institution? |  |  |  |
| **Standard XI.F. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 31:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

Tuition reductions other than scholarships are considered discounts. Discounts are permitted for well-defined groups, for specific and bona fide purposes, or for a specified period. Discounts must indicate the actual reduction in the costs that would otherwise be charged by the institution.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution offer discounts? |  |  |  |
| Does the institution identify well-defined groups that receive discounts? |  |  |  |
| Did the institution provide adequate reasoning for offering well-defined groups a discount? |  |  |  |
| If the institution offers discounts for a specific time period, did it adequately describe such discounts and verify that students are also enrolled in non-discounted courses or programs for a reasonably substantial period of time during each calendar year? |  |  |  |
| Is information on discounts published in the institution’s advertising and marketing materials, including the catalog and website? |  |  |  |
| **Standard XI.G. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 Process**

The institution verifies that all admissions requirements are met prior to admission and collects appropriate evidence, such as official transcripts and English Language proficiency documentation, to support eligibility. English language proficiency is verified for applicants whose native language is not English and who have not earned a degree from an appropriately accredited institution where English is the principal language of instruction. Such verification procedures align with DEAC’s guidance on English Language Proficiency Assessment located in Appendix IX. The institution documents the basis for any denial of admission. Official transcripts, if required for admission, must be received within a defined enrollment period not to exceed 12 semester credit hours. Students who do not submit required official transcripts within the prescribed period are administratively withdrawn.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document that all admissions requirements are met prior to offering admission to a student? |  |  |  |
| Does the institution adequately document the basis for any denial of admission? |  |  |  |
| Does the institution follow adequate procedures for informing applicants of their acceptance or denial of admission? |  |  |  |
| If the institution allows students to begin enrollment prior to receiving official transcripts, is the enrollment period allowed for receipt clearly defined and less than or equal to 12 semester credit hours or equivalent? |  |  |  |
| Does the institution follow an adequate process for verifying that official transcripts are received within the defined enrollment period? |  |  |  |
| Does the institution withdraw students when official transcripts are not received within the defined enrollment period? |  |  |  |
| Does the institution follow adequate processes for evaluating transcripts that are not in English (or other language if the prior educational transcripts are not in the language of instruction)? |  |  |  |
| Does the institution publish appropriate admissions requirements for foreign transcript evaluation? |  |  |  |
| Does the institution use appropriate third-party transcript evaluators? |  |  |  |
| Do the institution’s transcript evaluators possess expertise in the educational practices of the country of origin? |  |  |  |
| Does the institution follow adequate processes for verifying published language proficiency requirements? |  |  |  |
| Does the institution publish appropriate language proficiency requirements? |  |  |  |
| Do the institution’s foreign language verification procedures align with DEAC’s guidance on English Language Proficiency Assessment as disclosed in DEAC Handbook, Part Four: Appendix IX? Or, does the institution have an equivalent policy if the language of instruction is other than English? |  |  |  |
| **Standard XI.H. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 XII: Student Support Services

* + 1. **Student Inquiries and Requests for Assistance**

The institution must provide readily accessible methods through which students can submit inquiries, report issues or concerns (whether or not filing a formal complaint), request assistance, or otherwise communicate with institution faculty and/or staff. The institution responds promptly and thoroughly to all student inquiries.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution offer various methods through which students can submit inquiries, report issues or concerns, request assistance, or otherwise communicate with faculty and staff? |  |  |  |
| Are the institution’s provided communication methods readily accessible for student use? |  |  |  |
| Does the institution adequately respond to administrative inquiries (e.g., admissions, enrollment, transcript requests, technology)? |  |  |  |
| Does the institution adequately respond to academic inquiries (e.g., assignment submission, assessment requirements, grades)? |  |  |  |
| Are the procedures followed by faculty for reviewing, evaluating, and grading examinations and assessments adequate? |  |  |  |
| Does the institution offer adequate transcript services for current students and alumni? |  |  |  |
| **Standard XII.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 32:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 readily available to assist students in achieving institutional and program requirements, program outcomes, course learning outcomes, and educational goals as required by laws applicable to the jurisdiction(s) in which the institution operates.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution offer adequate academic advising and instructional support to assist students having difficulties in meeting program requirements? |  |  |  |
| Does the institution’s academic advising and instructional support encourage students to meet program requirements, achieve program and course outcomes, and attain educational goals? |  |  |  |
| Does the institution adequately assist students with their needs, as required by laws applicable to the jurisdiction(s) in which the institution operates? |  |  |  |
| **Standard XII.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

The institution’s policies and procedures optimize interaction between the institution and students. The interaction proactively promotes student completion and success.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s policies, procedures, and time frames for monitoring and encouraging student progress adequate? |  |  |  |
| Are the various types of contact used by the institution adequate to encourage students to achieve stated program outcomes? |  |  |  |
| **Standard XII.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 33:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 XIII: Fair Practices

* 1. **Confidentiality and Privacy**

The institution’s policies, procedures, and systems protect student confidentiality and privacy as required by laws applicable to the jurisdiction(s) in which the institution operates.

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| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s confidentiality and privacy policies adequate? |  |  |  |
| Do the institution’s procedures and systems in place adequately protect student confidentiality and privacy as required by laws applicable to the jurisdiction(s) in which the institution operates? |  |  |  |
| **Standard XIII.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 34:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Complaint Procedures**

1. 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. 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.
2. 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.
3. 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.
4. The institution’s complaint policy states how complaints can be filed with state agencies and with its accrediting organization.
5. The institution will retain the complete files for all complaints that may be filed against the institution, its faculty, staff, students, or other associated parties either for five years from the filing of the complaint or until the completion of the institution’s next cycle of evaluation for accreditation, whichever is longer.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies and procedures for receiving, responding to, and addressing student complaints? |  |  |  |
| Is the institution’s complaint policy appropriately published? |  |  |  |
| Does the institution’s complaint policy provide students with information on filing a complaint with the appropriate state licensing or authorizing authority and with DEAC? |  |  |  |
| Does the institution retain complete files for all complaints filed against the institution, its faculty, staff, students, or other associated parties for an appropriate length of time, as defined by Standard XIII.B.5.? |  |  |  |
| Did the institution resolve adequately and in a timely manner any complaints received in the past five years? |  |  |  |
| **Standard XIII.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 35:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 and Withdrawals**

Institutions maintain, publish, and consistently apply fair and equitable cancellation and withdrawal policies that meet or exceed the requirements of state and federal regulators, DEAC, and such other industry regulators as may have jurisdiction over one or more of the institution’s programs. Students may notify the institution of cancellation or withdrawal in any manner the institution deems appropriate so long as the method or methods available are reasonable and in compliance with applicable state and federal requirements. Policies pursuant to when an institution may administratively withdraw a student or cancel their enrollment are published and readily accessible for review by the student.

1. A student shall have no less than five calendar days following their executing the enrollment agreement or other contractual document in which to cancel the agreement and/or contract and receive a full refund of any monies paid to the institution.
2. Students are notified promptly if they are administratively withdrawn for non- compliance with attendance or other administrative policy.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe its cancellation and withdrawal policies? |  |  |  |
| Did the institution describe any state, federal, and industry regulatory requirements to which the institution’s cancellation and withdrawal policies are subject, and do the institution’s policies meet or exceed these requirements? |  |  |  |
| Does the institution describe how students are required to convey their cancellation or withdrawal to the institution? |  |  |  |
| Does the institution identify the individual, office, or offices to whom students may submit their notification? |  |  |  |
| Is the institution’s required method of cancellation/withdrawal notification in compliance with applicable regulatory requirements? |  |  |  |
| Can the institution’s required method of cancellation/withdrawal notification be reasonably satisfied by students? |  |  |  |
| Did the institution identify appropriate circumstances under which it administratively withdraws a student or cancels their enrollment? |  |  |  |
| Does the institution allow students a minimum of 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? |  |  |  |
| Does the institution promptly inform applicants they have been administratively withdrawn and the reasons for withdrawal? |  |  |  |
| **Standard XIII.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

Institutions must implement fair and equitable refund policies that meet or exceed the requirements of their government regulators, including consumer rights and protection policies. In the absence of such requirements, the institution follows DEAC’s refund policy requirements in Appendix XIV. Refund policies include procedures for students who enroll but do not start coursework and students failing to persist or make satisfactory academic progress. Refund policies must be clearly stated and transparently disclosed, including the use of sample calculations. Any money due to a student must be refunded within 30 days of the student’s notice of cancellation or withdrawal; refunds due to funding agencies must be returned in compliance with their respective requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution’s refund policy include sample refund calculations? |  |  |  |
| Is the institution’s refund policy published on its website? |  |  |  |
| Does the institution implement a fair and equitable refund policy that meets or exceeds applicable government regulations, including consumer rights and protection policies, or, in the absence of such requirements, in accordance with DEAC’s refund policy requirements in DEAC Handbook, Part 4, Appendix XIV? |  |  |  |
| Does the institution follow adequate and appropriate procedures for refunding students’ tuition if they enroll but do not start coursework? |  |  |  |
| Does the institution follow adequate and appropriate procedures for refunding students’ tuition if they fail to persist or fail to make satisfactory academic progress? |  |  |  |
| Does the institution refund any money due to a student within 30 days of the student’s notice of cancellation or withdrawal? |  |  |  |
| Does the institution return any refunds due to funding agencies in compliance with their respective requirements? |  |  |  |
| Did the institution properly process refunds requested in the last 12 months, based on its published refund policy? |  |  |  |
| **Standard XIII.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 36:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 well as any other requirements in accordance with state, federal, and other relevant regulatory agencies and in accordance with DEAC’s student achievement disclosure format.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution disclose student achievement and assessment performance measures on its website? |  |  |  |
| Do the institution’s student achievement and other disclosures comply with applicable state, federal, or other relevant regulatory agency requirements? |  |  |  |
| Does the institution routinely update student achievement disclosures on its website with reliable, current, and accurate data? |  |  |  |
| **Standard XIII.E. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 37:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Advertising and Promotion**

The institution conforms to ethical practices in all advertising and promotion to prospective students. The institution’s processes and procedures ensure that all advertisements, website content, and other marketing collateral is truthful, accurate, and clearly stated. The institution complies with DEAC’s Catalog Disclosures Checklist and DEAC’s Website Disclosures Checklist.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe its approach to advertising and promotion of its programs? |  |  |  |
| Did the institution identify who is responsible for the institution’s marketing and advertising decisions? |  |  |  |
| Is the individual responsible for the institution’s marketing appropriately qualified by education or experience for this role? |  |  |  |
| Does the institution have adequate processes and procedures in place to verify that all advertisements, website content, and marketing collateral are truthful, accurate, clear? |  |  |  |
| Does the institution comply with the DEAC Catalog Disclosures Checklist? |  |  |  |
| Does the institution comply with the DEAC Website Disclosures Checklist? |  |  |  |
| **Standard XIII.F. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 38:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 discloses 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. Institutions publish a statement of accreditation only as follows:

* Accredited by the Distance Education Accrediting Commission
* DEAC Accredited

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| **For Institutions seeking Initial Accreditation:** Is the institution prepared to accurately disclose its accredited status, in compliance with the content requirements disclosed by DEAC Standard XIII.G.? |  |  |  |
| **For Institutions seeking Renewal of Accreditation:** Does the institution accurately disclose its accredited status, in compliance with the content requirements disclosed by DEAC Standard XIII.G.? |  |  |  |
| **Standard XIII.G. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Truth in Lending**

The institution complies with all applicable Truth in Lending Act (TILA) requirements, including those under Regulation Z, and state requirements for retail installment agreements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution in compliance with applicable Truth in Lending Act (TILA) requirements, including those under Regulation Z, and state requirements for retail installment agreements? |  |  |  |
| Does the institution employ an individual responsible for verifying compliance with all Truth in Lending Act (TILA) requirements? |  |  |  |
| Does the identified individual participate in adequate activities to remain up to date on Truth in Lending Act (TILA) requirements? |  |  |  |
| Does the institution publish all required state and Truth in Lending Act (TILA) disclosures on the enrollment agreement? |  |  |  |
| **Standard XIII.H. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 XIV: Finance[[1]](#footnote-2)

* 1. **Financial Practices**

The institution provides on an annual basis complete, comparative financial statements covering its two most recent fiscal years’ financial statements that are audited and prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America or the International Financial Reporting Standards (IFRS). In the event the operations of the institution are supported in whole or in part by a parent company or a third party, the Commission may require audited financial statements from the parent or third party to demonstrate that the entity possesses sufficient financial resources to provide the institution continued financial sustainability. 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, and inter-company transactions are clearly identified and defined. 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.

**[Note:** Throughout this Standard,compliance assessment questions refer only to audited comparative financial statements to align with the Standard as written. See the footnote for Standard XIV, regarding continued allowable submission of reviewed comparative financial statements through mid-2026 and adjust findings feedback accordingly].

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s audited comparative financial statements demonstrate financial responsibility? |  |  |  |
| Does the institution maintain sufficient resources to meet its financial obligations and provide quality educational offerings and service to students? |  |  |  |
| Are the institution’s financial statements regularly audited? |  |  |  |
| Did the institution submit its most recent fiscal year end audited comparative financial statements, opinion letter, and letter of financial statement validation? |  |  |  |
| Are the institution’s financial statements prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America or the International Financial Reporting Standards (IFRS)? |  |  |  |
| Are the institution’s budgeting processes adequate, and do they conform to accepted best practices? |  |  |  |
| Are the individuals responsible for creating and monitoring the institution’s budget qualified by education and experience? |  |  |  |
| Does the institution’s budgeting process document and verify that current and future operating results are sufficient to allow it to accomplish its mission and goals? |  |  |  |
| Is the institution supported by a parent company or third party? |  |  |  |
| If the institution is supported by a parent company or third party, does the supporting entity possess sufficient financial resources to provide the institution with continued financial sustainability? |  |  |  |
| Is the parent company or third party’s stated commitment to supporting the institution sufficient? |  |  |  |
| Is the supporting entity’s level of administrative and financial involvement adequate to promote the institution’s continued financial sustainability? |  |  |  |
| If the institution’s financial performance is included within the parent corporation or third party’s financial statements, did the institution provide adequate supplemental schedules disclosing its individual financial status? |  |  |  |
| If the institution’s financial performance is included within the parent corporation or third party’s financial statements, did the institution provide adequate supplemental schedules which clearly identify and defines inter-company transactions? |  |  |  |
| **Standard XIV.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 39:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 maintains adequate administrative staff and other resources to operate effectively within fiscal and budgeting constraints, consistent with its representations of the scope and quality of its educational offerings as guided by its mission statement and strategic plan. Any risk that exists is adequately monitored, manageable, and insured. The institution has adequate administrative resources for effective operations, and at least one person is qualified and able to prepare accurate financial reports in a timely manner. Documentation protocols and controls are in place to assure that finances are properly managed, monitored, and protected.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the individuals responsible for preparing the institution’s financial reports and budgets qualified by education and experience? |  |  |  |
| Are financial reports and budgets regularly prepared? |  |  |  |
| Does the institution employ an individual, internally or a third party, who is responsible for reviewing and approving financial reports and budgets? |  |  |  |
| Does the institution maintain adequate administrative resources to operate effectively within fiscal and budgeting constraints? |  |  |  |
| Are risks appropriately monitored, managed, and insured? |  |  |  |
| Does the institution maintain adequate insurance coverage? |  |  |  |
| Has the institution filed any significant insurance claims in the past five years? |  |  |  |
| Does the institution have adequate protocols and controls in place to verify that finances are properly managed, monitored, and protected? |  |  |  |
| Do the institution’s accounts payable (numbers, amounts, and age) reflect sound financial responsibility and management? |  |  |  |
| **Standard XIV.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 40:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

Financial statements must reflect that the institution has sufficient resources to meet the institution’s financial obligations to provide quality instruction and service to its students for the full period of each student’s enrollment, consistent with the institution’s program representations.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s financial statements reflect sufficient resources to meet its financial obligations to provide quality instruction and service to its students for the full period of students’ enrollment, as represented to the public? |  |  |  |
| Is the institution profitable? For nonprofits, does the institution have an excess of revenues over costs? |  |  |  |
| If the institution is not profitable, has the institution implemented strategic initiatives to achieve a positive operating result sufficient to fund future operations? |  |  |  |
| Does the institution have the resources necessary to fulfill all obligations to students in the event that a teach-out is required? |  |  |  |
| Does the institution use cost control and analysis systems to verify that it maintains sufficient current assets to fund a teach-out of students? |  |  |  |
| Have the institution’s owner(s) or governing board members ever declared bankruptcy? |  |  |  |
| If the institution is a sole proprietorship or partnership, have the owner(s), governing board members, chief executive officer, or top institution administrators have ever declared bankruptcy? |  |  |  |
| Does the institution maintain reserves for honoring future service obligations, bad debts, and refunds? |  |  |  |
| **Standard XIV.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 41:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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**

Annual 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 accountant (CPA) audit report accompanies these statements. At its discretion, the Commission may require additional financial reporting from the institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s financial statements prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America or the International Financial Reporting Standards (IFRS)? |  |  |  |
| Does the institution use the accrual method of accounting? |  |  |  |
| Is the institution’s independent auditing firm qualified and experienced? |  |  |  |
| Did the independent auditor identify any deviations while conducting the institution’s audit? |  |  |  |
| If applicable, did the institution identify how it plans to address and resolve any identified challenges, anomalies, or threats? |  |  |  |
| Does the institution have procedures that enable it to continue operations if it received a going concern or liquidity footnote opinion from the independent auditing firm? |  |  |  |
| If a going concern or liquidity uncertainty was resolved through continued shareholder support, did the institution explain why the independent auditing firm did not accept the support as sufficient to avoid the going concern opinion or liquidity note? |  |  |  |
| Did the institution certify that it understands that the Commission may, in its discretion, require that the institution deliver additional financial reporting as deemed necessary when circumstances raise questions as to the institution’s financial soundness and stability? |  |  |  |
| **Standard XIV.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 42:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution carry out collection procedures (both internal and contracted with third parties)? |  |  |  |
| Do the institution’s collection procedures (both internal and contracted with third parties) reflect sound and ethical business practices? |  |  |  |
| **Standard IX.E. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 XV: Facilities and Records Maintenance

1. **Records Protection**

The institution’s financial and administrative records, as well as students’ financial, educational, and personal information, are securely and confidentially maintained in accordance with laws applicable to the jurisdiction(s) in which the institution operates and with professional requirements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate procedures for maintaining financial and administrative records, as well as students’ financial, educational, and personal information? |  |  |  |
| Does the institution follow proactive steps to safeguard the security and confidentiality of financial and administrative records, as well as students’ financial, educational, and personal information? |  |  |  |
| Do the institution’s record maintenance and protection procedures comply with laws applicable to the jurisdiction(s) in which the institution operates, as well as with professional requirements? |  |  |  |
| Are physical records adequately secured on site? |  |  |  |
| Are digital records adequately secured and backed up to minimize data loss? |  |  |  |
| **Standard XV.A. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 43:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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 laws applicable to the jurisdiction(s) in which the institution operates. The institution implements a comprehensive document retention policy. Transcripts are readily accessible and are maintained permanently in either print or digital form.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution follow adequate processes for retaining financial, administrative, and student records in accordance with the laws applicable to the jurisdiction(s) in which the institution operates? |  |  |  |
| Did the institution state how long financial records are maintained? |  |  |  |
| Did the institution state how long administrative records are maintained? |  |  |  |
| Did the institution state how long student records are maintained? |  |  |  |
| Does the institution implement an adequate comprehensive document retention policy? |  |  |  |
| Did the institution identify those responsible for ensuring the proper retention of financial, administrative, and student records? |  |  |  |
| Does the institution conduct regular internal audits for compliance with all applicable federal and state laws? |  |  |  |
| Is transcript information readily accessible and permanently maintained in order for the institution to produce an official transcript in a timely manner? |  |  |  |
| **Standard XV.B. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Facilities, Equipment, and Supplies**

The institution’s primary facility is located in a professional, institution-branded space authorized by local authorities for mixed use or commercial use. The institution maintains a written facilities plan and budget allocations to maintain facilities, equipment, and supplies to support its educational offerings, student support services, and administrative operations on a sustainable basis. Buildings, workspaces, and equipment comply with local fire, building, health, and safety regulations.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s primary facility located in a professional, institution-branded space which is authorized by local authorities for mixed use or commercial use? |  |  |  |
| Do the institution’s facilities, equipment, and supplies support its educational offerings, student support services, and administrative operations on a sustainable basis? |  |  |  |
| Is the institution’s technical infrastructure adequate to support its educational offerings, student support services, and administrative operations on a sustainable basis? |  |  |  |
| Does the institution have a sufficient plan for maintenance that includes upgrades of its facilities, equipment, and supplies? |  |  |  |
| Does the institution have adequate financial resources and budgets to maintain and upgrade its facilities and equipment? |  |  |  |
| Do the institution’s building, workspace, and equipment comply with local fire, building, health, and safety regulations? |  |  |  |
| **Standard XV.C. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**Exhibit 44:** Provide detailed feedback for the Exhibit(s) related to this core component. The applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **Protection of Physical Sites and Virtual Infrastructure**

The institution’s physical location(s) and virtual infrastructure are adequate to secure financial, administrative, and student educational records; are reasonably accessible; and are adequately protected in accordance with laws applicable to the jurisdiction(s) in which the institution operates. An adequate disaster response and recovery plan is in place that includes mitigation of risks, i.e., at a minimum, the ability to sustain and support continuing academic operations, the protection of student information consistent with applicable law, and the mitigation of other risks presented by physical, environmental, cybersecurity, force majeure, and other reasonably foreseeable threats.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s physical location adequate to secure physical financial, administrative, and student educational records, while ensuring that they are reasonably accessible for use? |  |  |  |
| Is the institution’s virtual infrastructure adequate to secure digital financial, administrative, and student educational records, while ensuring that they are reasonably accessible for use? |  |  |  |
| Are institutional records adequately protected in accordance with laws applicable to the jurisdiction(s) in which the institution operates and in response to foreseeable physical or cybersecurity risks? |  |  |  |
| Does the institution have appropriate disaster response and recovery procedures for its physical and environmental location(s)? |  |  |  |
| Does the institution’s disaster response and recovery plan include contingencies to sustain and support continued academic operations and protect student information, consistent with applicable law? |  |  |  |
| **Standard XV.D. – Standard is Evident, Emerging, Not Evident, or Not Applicable** | Choose a finding. | | |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. **In-Residence Program Component Facilities**

The institution provides appropriate facilities for students participating in in-residence learning experiences. The facilities comply with all state and federal requirements. The institution maintains adequate insurance to protect students, faculty, and staff while participating in in- residence learning.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution conduct in-residence program components? If not, this is not applicable. If the institution indicated that it does conduct in-residence program components, refer to the institution’s In-Residence Program Companion document and complete the related Report Template. |  |  |  |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence included the Self-Evaluation Report.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the DEAC accreditation standard. Each required action must correspond to an identified DEAC accreditation standard or a core component. The initial applicant institution uses this feedback to strengthen its documentation, processes, and procedures.

**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. The implementation and submission timeframe of Standard XIV.A.’s requirement that institutions provide audited comparative financial statements (reviewed comparative financial statements will no longer be accepted) is as follows: For institutions with fiscal years ending between January 1, 2025, and June 30, 2025, audited financial statements are due by December 31, 2025. For institutions with fiscal years ending between July 1, 2025, and December 31, 2025, audited financial statements are due by June 30, 2026. In both cases, the Commission is waiving the requirement for comparative statements and accepting audits of one fiscal year. Future submissions of audited statements (submitted after June 30, 2026) must be prepared on a comparative basis. [↑](#footnote-ref-2)