



**U.S. DEPARTMENT OF EDUCATION
OFFICE OF POSTSECONDARY EDUCATION
ACCREDITATION DIVISION**

GUIDELINES

for

Preparing/Reviewing

PETITIONS and COMPLIANCE REPORTS

**In accordance with 34 CFR Part 602
The Secretary's Recognition of Accrediting Agencies**

For Use During the 2012 Review Cycle

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INTRODUCTION

This Guide was developed to assist anyone with a role in submitting or reviewing the petitions (the term “petition” has the same meaning as the term “application” as used in Subpart C of 34 CFR 602) of accrediting agencies seeking recognition from the U. S. Secretary of Education under the Higher Education Act of 1965 (HEA), as amended, as reliable authorities of the quality of education or training provided by the institutions of higher education and the higher education programs they accredit.

This Guide does not supersede applicable regulations. Neither is it an attempt on our part to be prescriptive about the way an accrediting agency conducts its business, nor is it an attempt to “standardize” the accrediting process. The guidance provides a framework that can help to ensure a more transparent process by providing greater insight into what we generally look for in a review of an agency petition and report and as a result it also should provide increased consistency in the review of agencies. Additional information, not addressed in this Guide, may also be needed to enable an agency to demonstrate that it meets the regulatory Criteria for Recognition (criteria) found in Part 602 of Title 34 of the Code of Federal Regulations.

The Guide reflects our general practice of looking first to see if the agency’s written standards, policies or procedures conform to the Secretary’s regulations, and if there is evidence that the agency’s actual practices follow its standards, policies, or procedures in regard to each regulation. It is important to note that the staff approach to the review of any criterion is not a checkbox of the elements. We do not necessarily conclude that an agency does not meet a criterion if the agency does not have an “answer” for one or more of the review elements in the guidance related to a specific criterion. As well, some of the guidance may not apply to every agency. The approach to the review of any criterion is generally more holistic. Some agencies may have an alternative, yet perfectly acceptable, way of addressing the regulatory requirement, and we make note of this in our review of the agency.

The guidance within this document provides explication into each criterion by way of a collection of some of the review elements and typical documentation that we look for when evaluating an agency to determine if it meets the regulatory requirements, if appropriate, for that agency. These review elements and typical documentation generally represent what we have found to be commonly-accepted accreditation practice, but they by no means represent the only accepted practice for complying with the specific regulatory requirement.

The text of the regulatory criteria for recognition appears throughout this Guide, in each case in a text box. The ***new or revised regulatory language effective July 1, 2010 and July 2, 2011 is bolded and italicized.*** When submitting an application for recognition or renewal of recognition, the agency is to address each of the criteria for recognition, as applicable, including each of the subsections. The application should be complete and as clear as possible, to avoid miscommunication. For example, if the term “policy,” “procedure” or “process” is used, please provide a detailed description or copy of the policy, procedure or process and information about where it can be found in the agency documentation. All responses and documentation should be submitted electronically at: <http://opeweb.ed.gov/aslweb/>. In making its submission, the agency should carefully review and follow the procedures specified in 34 CFR 602.31 in the interests of protecting from public disclosure, where possible under the law, information the agency regards as confidential. Information specifically requested by the Department must be provided.

If you have any questions about a specific review element or type of documentation, or our use of these items in evaluating an agency, or any other related matter, please feel free to contact the Accreditation Division at 202-219-7011.

DEFINITIONS

(§ 602.3)

Following enactment of the Higher Education Opportunity Act in 2008, which amended the HEA, the Department engaged in a negotiated rulemaking process concerning regulations in 34 CFR Part 602 governing the Secretary's Recognition of Accrediting Agencies. As a result of the amended statute and the negotiations, some regulatory definitions have been added and/or revised. The additions and revisions are bolded and italicized for easier identification. Users of the guide are encouraged to become familiar with the current definitions that apply to Part 602.

Accreditation means the status of public recognition that an accrediting agency grants to an educational institution or program that meets the agency's standards and requirements.

Accrediting agency or agency means a legal entity, or that part of a legal entity, that conducts accrediting activities through voluntary, non-Federal peer review and makes decisions concerning the accreditation or preaccreditation status of institutions, programs, or both.

Act means the Higher Education Act of 1965, as amended.

Adverse accrediting action or adverse action means the denial, withdrawal, suspension, revocation, or termination of accreditation or preaccreditation, or any comparable accrediting action an agency may take against an institution or program.

Advisory Committee means the National Advisory Committee on Institutional Quality and Integrity (NACIQI).

Branch campus means a location of an institution that meets the definition of branch campus in 34 CFR 600.2. ["A location of an institution that is geographically apart and independent of the main campus of that institution. The Secretary considers a location of an institution to be independent of the main campus if the location--(1) Is permanent in nature; (2) Offers courses in educational programs leading to a degree, certificate, or other recognized educational credential; (3) Has its own faculty and administrative or supervisory organization; and (4) Has its own budgetary and hiring authority."]

Compliance report means a written report that the Department requires an agency to file to demonstrate that the agency has addressed deficiencies specified in a decision letter from the senior Department official or the Secretary.

Correspondence education means:

(1) Education provided through one or more courses by an institution under which the institution provides instructional materials, by mail or electronic transmission, including examinations on the materials, to students who are separated from the instructor.

(2) Interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student.

(3) Correspondence courses are typically self-paced.

(4) Correspondence education is not distance education.

Designated Federal Official means the Federal officer designated under section 10(f) of the Federal Advisory Committee Act, 5 U.S.C. Appdx. 1.

Direct assessment program means an instructional program that, in lieu of credit hours or clock hours as a measure of student learning, utilizes direct assessment of student learning, or recognizes the direct assessment of student learning by others, and meets the conditions of 34 CFR 668.10. For Title IV, HEA purposes, the institution must obtain approval for the direct assessment program from the Secretary under 34 CFR 668.10(g) or (h) as applicable. As part of that approval, the accrediting agency must--

(1) Evaluate the program(s) and include them in the institution's grant of accreditation or preaccreditation; and

(2) Review and approve the institution's claim of each direct assessment program's equivalence in terms of credit or clock hours.

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

(1) The internet;

(2) One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices;

(3) Audioconferencing; or

(4) Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3).

Final accrediting action means a final determination by an accrediting agency regarding the accreditation or preaccreditation status of an institution or program. A final accrediting action is not appealable within the agency.

Institution of higher education or ***institution*** means an educational institution that qualifies, or may qualify, as an eligible institution under 34 CFR Part 600. [See 34 CFR 600.4, "Institution of Higher Education"; 34 CFR 600.5, "Proprietary Institution of Higher Education"; and 34 CFR 600.6, "Postsecondary Vocational Institution."]

Institutional accrediting agency means an agency that accredits institutions of higher education.

Nationally recognized accrediting agency, nationally recognized agency, or recognized agency means an accrediting agency that the Secretary recognizes under this part.

Preaccreditation means the status of public recognition that an accrediting agency grants to an institution or program for a limited period of time that signifies the agency has determined that the institution or program is progressing towards accreditation and is likely to attain accreditation before the expiration of that limited period of time.

Program means a postsecondary educational program offered by an institution of higher education that leads to an academic or professional degree, certificate, or other recognized educational credential.

Programmatic accrediting agency means an agency that accredits specific educational programs that prepare students for entry into a profession, occupation, or vocation.

Recognition means an unappealed determination by the senior Department official under §602.36, or a determination by the Secretary on appeal under §602.37, that an accrediting agency complies with the criteria for recognition listed in subpart B of this part and that the agency is effective in its application of those criteria. A grant of recognition to an agency as a reliable authority regarding the quality of education or training offered by institutions or programs it accredits remains in effect for the term granted except upon a determination made in accordance with subpart C of this part that the agency no longer complies with the subpart B criteria or that it has become ineffective in its application of those criteria.

Representative of the public means a person who is not--

- (1) An employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or preaccredited by the agency or has applied for accreditation or preaccreditation;
- (2) A member of any trade association or membership organization related to, affiliated with, or associated with the agency; or
- (3) A spouse, parent, child, or sibling of an individual identified in paragraph (1) or (2) of this definition.

Scope of recognition or scope means the range of accrediting activities for which the Secretary recognizes an agency. The Secretary may place a limitation on the scope of an agency's recognition for Title IV, HEA purposes. The Secretary's designation of scope defines the recognition granted according to--

- (1) Geographic area of accrediting activities;
- (2) Types of degrees and certificates covered;
- (3) Types of institutions and programs covered;
- (4) Types of preaccreditation status covered, if any; and
- (5) Coverage of accrediting activities related to distance education ***or correspondence education***, if any.

Secretary means the Secretary of the U.S. Department of Education or any official or employee of the Department acting for the Secretary under a delegation of authority.

Senior Department official means the senior official in the U.S. Department of Education who reports directly to the Secretary regarding accrediting agency recognition.

State means a State of the Union, American Samoa, the Commonwealth of Puerto Rico, the District of Columbia, Guam, the United States Virgin Islands, the Commonwealth of the Northern Mariana Islands, the Republic of the Marshall Islands, the Federated States of Micronesia, and the Republic of Palau. The latter three are also known as the Freely Associated States.

Teach-out agreement means a written agreement between institutions that provides for the equitable treatment of students *and a reasonable opportunity for students to complete their program of study* if *an institution, or an institutional location that provides one hundred percent of at least one program offered*, ceases to operate before all *enrolled* students have completed their *program of study*.

Teach-out plan means *a written plan developed by an institution that provides for the equitable treatment of students if an institution, or an institutional location that provides one hundred percent of at least one program, ceases to operate before all students have completed their program of study, and may include, if required by the institution's accrediting agency, a teach-out agreement between institutions.*

THE CRITERIA FOR RECOGNITION

BASIC ELIGIBILITY REQUIREMENTS

(§602.10 - §602.13)

General Guidance:

An entity seeking recognition must first meet the eligibility requirements prior to continuance of the recognition review. There are four eligibility requirements--

First, as a consequence of the regulatory definition of "accrediting agency" set out above, eligibility to seek recognition is limited to a legal entity, or that part of a legal entity, that conducts accrediting activities through voluntary, non-Federal, peer review and makes decisions concerning the accreditation status of institutions of higher education, programs, or both.

Second, an agency must demonstrate that it has a federal link -- that is, the agency's accreditation is a required element in enabling at least one of the institutions/programs it accredits to establish eligibility to participate in some Federal program.

Third, in seeking recognition, an agency must demonstrate that it conducts accrediting activities throughout the geographic area for which it requests recognition¹, be able to demonstrate that it has conducted such accrediting activities for at least two years prior to seeking recognition, as well as that it has accredited one or more institutions/programs for each of the specific degrees, certificates, and institution/program types for which it seeks recognition, to include distance or correspondence education.

Lastly, under this component of the recognition review, an agency must be able to demonstrate that its standards, policies, procedures, and accreditation decisions are widely accepted in the United States by educators and educational institutions, licensing bodies (if appropriate), practitioners, and employers of graduates from accredited institutions/programs.

Criteria §602.10-§602.13 are basic eligibility requirements. An agency that cannot demonstrate compliance with these sections of the criteria cannot proceed with the initial recognition process and recognized agencies may not be eligible for continued recognition.

Some agencies have asked why they need to respond to §602.10 through §602.13 each time they come up for renewed recognition, especially when there are no changes. For each review, the petition readers need a complete, current, and accurate description of the agency. Therefore, an agency is advised to keep an electronic copy of the narrative and documentation it submits into the ASL records system in order to facilitate future submissions.

¹ Under 34 CFR 602.31(a)(1), each application should include a statement of the agency's requested scope of recognition, which should include geographic scope and the other elements listed in the regulatory definition of "Scope of Recognition." The requested scope should specifically reference distance education and/or correspondence education, if the agency desires either or both of these to be included in the scope of recognition grants. If the agency conducts accrediting activities for which recognition is not sought, those should be specified as well.

§602.10 Link to Federal programs.

The agency must demonstrate that --

- (a) If the agency accredits institutions of higher education, its accreditation is a required element in enabling at least one of those institutions to establish eligibility to participate in HEA programs; or
- (b) If the agency accredits institutions of higher education or higher education programs, or both, its accreditation is a required element in enabling at least one of those entities to establish eligibility to participate in non-HEA Federal programs.

1. For an agency that accredits **institutions** AND seeks **initial recognition for HEA purposes** --

1(a) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- At least one specific HEA program for which the agency believes its accreditation or preaccreditation satisfies, or will satisfy, a required element of institutional eligibility; and included a citation to, and text of, the eligibility requirements.
- The institutions the agency has accredited or preaccredited and their locations.
- The name of at least one accredited institution that has committed to the agency to expeditiously use the agency's accreditation or preaccreditation to establish eligibility to participate in one or more HEA programs.
- How the agency's accredited institutions meet the definition of "institution of higher education" (34 CFR 600.4); or of "proprietary institution of higher education" (34 CFR 600.5); or of "postsecondary vocational institution" (34 CFR 600.6).

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate --

- Letter granting accreditation or preaccreditation to one or more institution(s).
- Letter from an accredited institution indicating that it will expeditiously apply to participate in at least one HEA program identifying at least one program, and the agency as its primary accreditor for federal purposes, and the expected date for applying.

For an agency that accredits **institutions and/or programs** AND seeks **initial recognition for non-HEA Federal purposes** --

1(b) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- At least one non-HEA Federal program that specifically requires accreditation by an agency recognized by the U. S. Secretary of Education before an institution or program can be

eligible to participate (e.g., Health and Human Services grants, National Institutes of Health tuition repayment, Veterans Administration education benefits).

- At least one accredited institution or program that has committed to the agency to expeditiously use the agency's accreditation or preaccreditation to establish eligibility to participate in one or more non-HEA Federal programs.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate --

- A letter granting accreditation or preaccreditation to at least one institution or program.
- A copy of the specific portion of the authorizing law and/or other Federal documents (e.g., regulations) stating accreditation by the agency, or by an agency recognized by the Secretary, would satisfy an eligibility requirement for participation in the non-HEA Federal program.
- A letter from an accredited institution or program indicating that it will expeditiously apply to participate in the non-HEA Federal program.

2. For an agency that accredits **institutions** and is seeking **continued** recognition for **HEA** program purposes --

2(a) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- At least one institution that currently relies on the agency's accreditation to participate in one or more HEA programs, or that commits to do so. The accrediting agency should be aware that a positive recommendation for continued recognition may not be forthcoming, if there is no evidence that at least one institution is actually participating in an HEA program by the expiration of the initial recognition.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate --

- Evidence of participation by an accredited or preaccredited institution in an HEA program, or of an application by an institution to do so, and that an institution relies on the agency's accreditation or preaccreditation for this purpose, or
- Evidence of commitment by an institution to do so expeditiously (i.e., evidence of filing an application for eligibility.)

For an agency that accredits **institutions and/or programs** and is seeking **continued** recognition for **non-HEA** Federal program purposes --

2(b) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- At least one institution or program that currently participates, or is currently applying to participate, in one or more Federal programs (specifically identified) that requires

accreditation by an agency recognized by the U. S. Secretary of Education as a prerequisite to establishing eligibility to participate in the non-HEA Federal program, or at least one accredited institution or program that applied to participate in a current competition but was not selected for reasons other than eligibility. The accrediting agency should be aware that a positive recommendation for continued recognition may not be forthcoming, if there is no evidence that at least one institution or program is actually participating in a non-HEA program by the expiration of initial recognition.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- A copy of the specific portion of the authorizing law and other Federal documents (e.g., regulations) stating accreditation or preaccreditation by the agency, or by an agency recognized by the Secretary, is required for participation in the non-HEA Federal program.
- Documents of institutions' and/or programs' eligibility and participation in the non-HEA Federal program (e.g., grant acceptance letters), or of applications by the institution or program to participate, and that the institution or program relies on the agency's accreditation or preaccreditation for this purpose.

§602.11 Geographic scope of accrediting activities.

The agency must demonstrate that its accrediting activities cover --

- (a) A State, if the agency is part of a State government;**
- (b) A region of the United States that includes at least three States that are reasonably close to one another; or**
- (c) The United States.**

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as --

- If an agency has or requests a regional scope, it demonstrates that it actually accredits institutions and/or programs in at least three States in that region that are reasonably close to one another.
- If an agency has or requests a national scope, it demonstrates that it actually accredits institutions and/or programs within the United States.
- The geographic breadth of the agency's accrediting activities as described in the agency's official documents. If an agency is a component of a State government, that its accrediting activities cover the State. (Note: By law, only the New York Board of Regents can meet this section.)

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- A list of accredited institutions and/or programs and their locations.
- The section of the agency's by-laws, constitution, charter, or other governing documents authorizing the agency to accredit institutions and/or programs within the United States or a specific region.

§602.12 Accrediting experience.

(a) An agency seeking initial recognition must demonstrate that it has --

(1) Granted accreditation or preaccreditation --

(i) To one or more institutions if it is requesting recognition as an institutional accrediting agency and to one or more programs if it is requesting recognition as a programmatic accrediting agency;

(ii) That covers the range of the specific degrees, certificates, institutions, and programs for which it seeks recognition; and

(iii) In the geographic area for which it seeks recognition; and

(2) Conducted accrediting activities, including deciding whether to grant or deny accreditation or preaccreditation, for at least two years prior to seeking recognition.

(b) A recognized agency seeking an expansion of its scope of recognition must demonstrate that it has granted accreditation or preaccreditation covering the range of the specific degrees, certificates, institutions, and programs for which it seeks the expansion of scope.

For an agency seeking **initial** recognition --

(a)(1-2) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- The agency has conducted accrediting activities covering its requested scope of recognition, including the accreditation or preaccreditation of at least one institution or program for the specific degrees and/or program types for which it seeks recognition.
- The agency has conducted accrediting activities within the geographic scope for which it seeks recognition.
- The agency has conducted accrediting activities for at least two years prior to applying for recognition, including making accreditation decisions. Other activities could also include, for example, training, accreditation reviews, and/or standards reviews and revisions.
- A clear statement of the range of the degrees, certificates and types of institutions and/or programs for which it seeks recognition, as well as the geographic scope of recognition it seeks.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copies of accrediting decision letters
- Documentation of training, accreditation reviews, and/or standards reviews and revisions, decision meetings etc. demonstrating that the agency has been conducting accrediting activities covering its requested scope of recognition for at least two years.

For an agency seeking an **expansion of scope** (other than through written notice to the Secretary that the agency is now accrediting distance education or correspondence education) –

(b). Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- The agency has evaluated and granted accreditation or preaccreditation to institutions and/or programs that cover the range of the requested expansion of scope. (The only exception to this requirement is a request for a geographic expansion.)
- The agency has provided a clear statement of the requested expansion of scope.
- The agency has policies, procedures, and standards that are applicable to the requested expansion of scope.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Documentation of application of the policies, procedures and standards for the review and evaluation of institutions and/or programs that would be included in the requested expansion of its scope.

§602.13 Acceptance of the agency by others.

The agency must demonstrate that its standards, policies, procedures, and decisions to grant or deny accreditation are widely accepted in the United States by --

(a) Educators and educational institutions; and

(b) Licensing bodies, practitioners, and employers in the professional or vocational fields for which the educational institutions or programs within the agency's jurisdiction prepare their students.

General Guidance on §602.13:

Wide acceptance does not necessarily mean unanimous acceptance by all of the agency's constituents/communities of interest. How "wide acceptance" is demonstrated may assume a wide variety of approaches. However, it is expected that the agency can demonstrate an acceptance/support of its policies, procedures, accreditation standards and decisions by applicable group(s) (to include individuals/groups beyond those directly involved in the accrediting agency activities) in each of the categories, appropriate to the type of accrediting agency.

Wide Acceptance by Educators and Educational Institutions –**(a) Review Elements:**

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as --

- Participation by educators on the agency's site visit teams, commissions and other committees.
- Participation by educators in the agency's review and revision of standards and/or agency policies and procedures.
- Representation in agency activities by educators in fields or activities that align with the agency's current and/or requested scope.
- Geographic and institutional diversity of the educators involved with the accrediting agency (geographic location, member and/or non-member educators).

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample letters of support to the agency from educators in the agency's accredited programs or institutions.
- Sample letters of support to the agency from educators from outside of the agency's accredited programs or institutions.
- Examples of site visit teams or other committees on which educators serve.
- Evidence of educator participation in the review and revision of agency standards or policies.
- A web link to, or a copy of, the agency's directory of accredited institutions or programs.
- Sample letters of support from educational institutions that acknowledge their acceptance of agency policies, procedures, and accreditation decisions.
- Sample letter(s) of support from one or more relevant higher education association(s) representing educational institutions.

Wide Acceptance by Licensing Bodies –**(b) Review Elements:**

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as --

- Graduation from an institution and/or program accredited by the agency as a requirement to sit for an exam and/or to obtain a license or certification, employment, etc.
- Accreditation as acceptance by state approval authorities for institutional/program licensure to operate, reciprocity, etc.
- Support from state approval, licensure, and/or certification offices.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Letter(s) of support from any relevant licensing body(ies) acknowledging that the work of the agency is valuable.
- Evidence of the requirement that accreditation by the agency is an eligibility requirement for licensure for certification or to sit for the examination.

Wide Acceptance by **Practitioners** –

(b) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- Participation of practitioners on agency visit teams, commissions and other committees.
- Participation of practitioners in the agency's review and revision of standards and/or agency policies and procedures.
- Representation in agency activities by practitioners in fields or activities that align with the agency's current and/or requested scope.
- Geographic breadth of the practitioners involved with the accrediting agency.
- Acceptance of the agency's policies, procedures, accreditation standards and decisions by practitioner-based professional association(s).

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample letters of support from practitioners stating acceptance of agency policies, procedures, and accreditation decisions.
- Sample letter(s) of support from practitioner professional organization(s).
- Evidence of practitioner involvement on agency site visit evaluation teams, committees, and review and revision of standards.

Wide Acceptance by **Employers** –

(b) Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate --

- Participation of employers on agency visit teams, commissions and other committees.
- Participation of employers in the agency's review and revision of standards and/or agency policies and procedures.
- Representation in agency activities of employers from types of organizations that are aligned with the agency's current and/or requested scope.
- Representation of employers in accrediting agency activities from the geographic area included in the agency's current and/or requested scope.
- Graduation from an institution and/or program accredited or preaccredited by the agency is a requirement for seeking employment (e.g., State Departments of Education, Federal government, etc.).

- Involvement of advisory councils that include employers and other groups in the activities of accredited institutions and/or programs.
- Attendance of employers at agency-sponsored trainings, briefings, etc.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample letter(s) of support for the agency's policies, procedures, accreditation standards and decisions from employer-based association(s).
- Sample letters of support from employers and employer organization(s) stating acceptance of agency policies, procedures and accreditation decisions.
- Sample job announcements or other documentation that evidence that graduation from a program or institution accredited by the agency is a prerequisite for employment.

ORGANIZATIONAL/ADMINISTRATIVE REQUIREMENTS

(§602.14 - §602.15)

General Guidance:

Under these sections, an accrediting agency must explicitly demonstrate that its membership of programs, institutions or members of a profession whose educational programs are accredited by that agency is voluntary and that the primary purpose and mission of the agency is accreditation of educational institutions and/or programs. Additionally, and as applicable, the agency shall be demonstrate that the accrediting function is “separate and independent” of any affiliated, associated, or related trade association thus clarifying and demonstrating the autonomy and integrity of the accreditation activity.

An accrediting agency must be able to demonstrate its administrative and fiscal capability to carry out its accreditation activities across its requested scope of recognition. More specifically, this includes having adequate administrative and recordkeeping systems, individuals on all evaluation, policy- and decision-making bodies that are qualified and trained (by the agency), and administrative staff and financial resources to consistently conduct its business in accordance with its policies and procedures.

An accreditor must have and demonstrate that it has clear and effective controls against conflicts of interest, or the appearance of conflicts of interest, by all persons associated with the agency’s accreditation activities.

§602.14 Purpose and organization.

(a) The Secretary recognizes only the following four categories of agencies:

The Secretary recognizes...	that...
(1) An accrediting agency	<p>(i) Has a voluntary membership of institutions of higher education;</p> <p>(ii) Has as a principal purpose the accrediting of institutions of higher education <u>and</u> that accreditation is a required element in enabling those institutions to participate in HEA programs; <u>and</u></p> <p>(iii) Satisfies the “separate and independent” requirements in paragraph (b) of this section.</p>
(2) An accrediting agency	<p>(i) Has a voluntary membership; <u>and</u></p> <p>(ii) Has as its principal purpose the accrediting of higher education programs, <u>or</u> higher education programs and institutions of higher education, <u>and</u> that accreditation is a required element in enabling those entities to participate in non-HEA Federal programs.</p>
(3) An accrediting agency	<p>for purposes of determining eligibility for Title IV, HEA programs--</p> <p>(i) Either has a voluntary membership of individuals participating in a profession <u>or</u> has as its principal purpose the accrediting of programs within institutions that are accredited by a nationally recognized accrediting agency; <u>and</u></p> <p>(ii) Either satisfies the “separate and independent” requirements in paragraph (b) of this section <u>or</u> obtains a waiver of those requirements under paragraphs (d) and (e) of this section.</p>
(4) A State agency	<p>(i) Has as a principal purpose the accrediting of institutions of higher education, higher education programs, or both; <u>and</u></p> <p>(ii) The Secretary listed as a nationally recognized accrediting agency on or before October 1, 1991 and has recognized continuously since that date.</p>

Review Elements:

- [For all categories] In assessing this area, Department staff looks to see that the agency has selected and described how it meets the requirements of the category (above) that best describes it. Agencies are advised to pay close attention to the conjunctions (underlined) to ensure that all required elements in the selected category are met.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- [For all categories] By-laws, articles of incorporation and policies, etc. defining the agency’s membership and principal purposes.

§602.14(b) For purposes of this section, the term separate and independent means that—

(1) The members of the agency's decision-making body--who decide the accreditation or preaccreditation status of institutions or programs, establish the agency's accreditation policies, or both--are not elected or selected by the board or chief executive officer of any related, associated, or affiliated trade association or membership organization;

(2) At least one member of the agency's decision-making body is a representative of the public, and at least one-seventh of that body consists of representatives of the public;

(3) The agency has established and implemented guidelines for each member of the decision-making body to avoid conflicts of interest in making decisions;

(4) The agency's dues are paid separately from any dues paid to any related, associated, or affiliated trade association or membership organization; and

(5) The agency develops and determines its own budget, with no review by or consultation with any other entity or organization.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The processes and criteria by which members of the agency's decision-making body are nominated, vetted, appointed and/or elected to ascertain that they are not appointed or elected by the Board or CEO of any related, associated, or affiliated trade association or membership organization. (An entity is considered a decision-making body if it makes final decisions for the agency on accreditation policy matters and/or accreditation status, including appeal decisions.)
- Members of the agency's decision-making bodies may be elected or selected by the membership of a related, associated, or affiliated association or organization. However, the CEO and Board members may not be elected or selected to sit on the agency's decision-making bodies.
- The processes by which public members are identified and vetted to ensure they meet the composition requirement that at least one member of the agency's decision-making body, and at least one-seventh of the total membership, consists of representatives of the public.
- The agency's approach to ensuring that those members selected as public members meet the Department's definition of a public member (see §602.3).
- The application of comprehensive and clearly stated conflict-of-interest guidelines for members of its decision-making body. (Helpful guidelines provide examples of what the agency considers to be conflicts of interest, including typical circumstances that are commonly accepted as presenting a conflict of interest.)
- The processes by which membership dues are assessed and paid separately to the accrediting agency from any dues that the membership may pay to a related, associated, or affiliated

trade association or membership organization.

- The processes by which the agency develops and determines how to spend its own budget without influence from any other organization or entity.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- The names of the agency’s related, affiliated, or associated trade associations or membership organizations.
- By-laws, charter, or other documents that identify the composition of the agency’s policy and decision-making bodies, including appeals panels; membership rosters of the agency’s decision-making bodies that describe members' current positions and identifies which members represent the public.
- Policies and procedures for the selection of its policy and decision-making bodies;
- Conflict-of-interest policies that apply to policy and decision-making bodies (including appeals panels).
- Evidence that the agency adheres to its conflict-of-interest policy (e.g., relevant meeting minutes, or conflict-of-interest statements signed by the members of its decision-making bodies).
- Policy and procedures for developing and approving the agency’s budget.
- Copy of the agency’s approved budget.
- Policy and procedures regarding how the agency sets and collects dues and fees from its membership.
- Copy of a completed receipt for dues and/or fees.
- The agency’s definition of “representative of the public” and evidence that at least 1/7 of the members of the agency’s policy and decision-making bodies are representatives of the public. (NOTE: The “one-seventh rule” is a minimum requirement, therefore, please round-up if the ratio of public members to total decision-makers currently falls between two whole numbers, for example, if the ratio equals 1.2 public members then the agency needs two public members.)

§602.14(c) The Secretary considers that any joint use of personnel, services, equipment, or facilities by an agency and a related, associated, or affiliated trade association or membership organization does not violate the “separate and independent” requirements in paragraph (b) of this section if --

(1) The agency pays the fair market value for its proportionate share of the joint use; and

(2) The joint use does not compromise the independence and confidentiality of the accreditation process.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The identification of any personnel, services, equipment or facilities used jointly with any

related organization, together with the percent each party uses for each of the jointly-used resources.

- How the agency determines fair market value for its share of the jointly-used resources, and how it reimburses the organization for its share of jointly used resources.
- How the joint use does not compromise the independence and confidentiality of the accreditation process, and that the organization has no input into the accrediting process.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- A copy of the documents that outline the joint use of resources with any organization such as a memorandum of agreement.
- An invoice, budget document, or audited financial statement showing the agency reimburses the organization for its share of jointly used resources.
- A policy document or signed agreement with the organization ensuring confidential accrediting documents are secure and not made available to the organization, and that the organization has no input into the accrediting process.

§602.14(d) For purposes of paragraph (a)(3) of this section, the Secretary may waive the "separate and independent" requirements in paragraph (b) of this section if the agency demonstrates that --

(1) The Secretary listed the agency as a nationally recognized agency on or before October 1, 1991 and has recognized it continuously since that date;

(2) The related, associated, or affiliated trade association or membership organization plays no role in making or ratifying either the accrediting or policy decisions of the agency;

(3) The agency has sufficient budgetary and administrative autonomy to carry out its accrediting functions independently; and

(4) The agency provides to the related, associated, or affiliated trade association or membership organization only information it makes available to the public.

(e) An agency seeking a waiver of the "separate and independent" requirements under paragraph (d) of this section must apply for the waiver each time the agency seeks recognition or continued recognition.

Review Elements:

In assessing this area, Department staff looks to see if those agencies that seek to apply for a waiver of the separate and independent requirements have discussed and demonstrated, as appropriate –

- That the agency's recognition by the Secretary occurred before October 1, 1991 and has been continuous since that date.
- The agency's policies and procedures that ensure that no related, associated, or affiliated

trade association or membership organization influences the making of, or ratifying, the accrediting or policy decisions of the agency.

- The agency's demonstration of its full autonomy in carrying out its accrediting functions and establishing its budget with no evidence of any outside influence in the agency's budgetary and administrative processes, and no evidence of any release of information to any related, associated, or affiliated trade association or membership organization, beyond that which the agency provides to the public.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Organizational documents, policies and procedures explaining how the agency's accrediting decisions and policies are made, how its budget is adopted and funded, and how its executive staff and decision-makers are selected, supervised and, if applicable, compensated.
- A copy of the agency's confidentiality policies, and most recent audited financial statements.
- A list of any members of the decision-making body(ies) or executive staff who are officers, directors, policymakers or executive staff of any related trade association or membership organization, and the positions those members occupy with the agency and with the trade or membership organization.
- Evidence that the board of the parent organization, if any, does not exercise control over the agency's budget.

§602.15 Administrative and fiscal responsibilities.

The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition. The agency meets this requirement if the agency demonstrates that--

(a) The agency has --

(1) Adequate administrative staff and financial resources to carry out its accrediting responsibilities.

Review Elements: In assessing this area, Department staff looks to see if the agency has discussed and demonstrated, as appropriate, aspects such as –

- The sufficiency of agency staff with appropriate credentials and qualifications to administer the agency's accreditation activities and finances in an effective manner within its scope of recognition. (For example, completion of all required accreditation activities in accordance with the agency's accreditation schedule may be considered as evidence of effectiveness as would having no record of complaints, regarding the agency's administrative capacity.)
- The organization of the agency such that its processes, e.g. recordkeeping and communications, are performed in a timely and competent manner, and records are up-to-date.
- How the numerical size of the agency's staff is appropriate to the extent of the agency's accreditation activities, and to the number of its institutions or programs.
- The sufficiency of agency financial resources to accomplish its accrediting functions and responsibilities; and that its funding sources place no constraints on its financial independence.

- The agency's major sources of income; and if the agency receives financial support from sources other than its accredited programs and institutions, how those sources impact the agency's financial independence.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- An organizational chart.
- Brief staff resumes, a list of their principal duties.
- Evidence of sufficient training for staff on the agency's standards, policies and procedures.
- Audited financial statements for the last two years reflecting the agency's financial sufficiency during the time periods of the statement.
- The current year's budget and a summary of the agency's projections for future income and expenditures and how they impact the accrediting activities.

§602.15(a) The agency has --

(2) Competent and knowledgeable individuals, qualified by education and experience in their own right and trained by the agency on *their responsibilities, as appropriate for their roles, regarding the agency's standards, policies, and procedures, to conduct its on-site evaluations, apply or establish its policies, and make its accrediting and preaccrediting decisions, including, if applicable to the agency's scope, their responsibilities regarding distance education and correspondence education.*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The processes/procedures/qualifying criteria it has in place, as appropriate, for selecting and training its evaluation, policy-making and decision-making entities; and that training covers the agency's accreditation standards, policies and procedures.
- How its recurring, structured, consistent, and systematic training (conducted prior to individuals assuming their duties) covers the agency's expectations regarding the responsibilities associated with each individual's role in conducting a review of an institution/program and decision-making.
- If the agency's recognized scope includes the evaluation of distance education or correspondence education, the agency's approach to training the team members in assessing these modes of delivery and applying the agency's standards, criteria and policies.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Written policies describing the composition of each of its policy and decision-making bodies and site visit evaluation teams, and for the training of these individuals;

- Written policies and procedures describing the qualifications, requirements and selection process for members of its policy and decision-making bodies, including appeals panels, and site visit evaluation teams;
- Sample resumes or other documentation describing the qualifications and experience of the members of each body;
- Sample training agenda/modules, including responsibilities with regard to distance education and correspondence education, as appropriate.

§602.15(a) The agency has --

(3) Academic and administrative personnel on its evaluation, policy and decision-making bodies, if the agency accredits institutions.

(4) Educators and practitioners on its evaluation, policy, and decision-making bodies, if the agency accredits programs or single-purpose institutions that prepare students for a specific profession.

General Guidance on §602.15(a)(3) and (a)(4):

The Department sets no maximum limit on the number of persons on site teams and decision-making bodies. Consequently, agencies are free to draw from many potential sources, to include retired persons, as well as those employed part-time and/or full-time. However, when evaluating an accrediting agency with few decision-makers or one that composes site teams of only two or three persons, it is important that the agency demonstrate its consistent appointment of individuals, appropriate to the type of program or institution being evaluated, who clearly fulfill all the representative categories required by the statute and regulations which, *under usual circumstances*, means a single individual fulfills one defined category/role at a time.

The following terms are not defined in §602. However, in the absence of agency-defined terms, staff generally apply the following common understandings –

Practitioner –someone currently or recently directly engaged in a significant manner in the practice of a profession in the area being evaluated

Educator –someone currently or recently directly engaged in a significant manner in postsecondary education in an academic capacity (e.g., professor, instructor, academic dean).

Academic –someone currently or recently directly engaged in a significant manner in postsecondary teaching and/or research,

Administrator –someone currently or recently directly engaged in a significant manner in postsecondary program or institutional administration.

The following section applies to any agency that accredits institutions (including programmatic accreditors that accredit single-purpose institutions). (§602.15(a)(3))

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- How the institutional accrediting agency's evaluation, policy and decision-making bodies (including appeals panels) are selected and composed of a mix of qualified academic and administrative personnel, as appropriate to the agency's recognized scope.
- How the agency ensures through written policy and procedures that both academic and administrative personnel are consistently included on its evaluation, policy and decision-making bodies.
- The agency's appointment and or nomination process and definitions it uses for selecting academics and administrators.
- How the agency's evaluation and decision-making process includes the breadth of academic expertise to ensure assessment of the non-degree vocational-technical educational programs offered by, primarily, vocational-technical education institutions.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample resumes, credentials or documentation describing the qualifications and experience of the members of each body.
- Samples of the composition of recent policy and decision-making bodies and the site visit evaluation teams that include clearly-designated academic and administrative personnel.

The following section applies to agencies that accredit programs or single-purpose institutions that prepare students for a specific profession (§602.15(a)(4))

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The composition of the agency's evaluation, policy and decision-making bodies (including appeals panels) reflect a mix of qualified educators and practitioners appropriate to the agency's recognized scope.
- The agency's practice and written policies/procedures ensures that both educators and practitioners consistently serve on its evaluation, policy and decision-making bodies.
- The agency's appeals panel contains the required mix of representatives appropriate to its recognized scope.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- The composition of the agency's current policy and decision-making bodies, clearly-designating educators and practitioners, together with brief resumes and/or other documentation describing the qualifications and experience of the members of each body.
- Samples of the composition of recent site visit evaluation teams that include clearly-designated educators and practitioners.

§602.15(a) The agency has --

(5) Representatives of the public on all decision-making bodies.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate –

- How the agency’s operational definition of “public representative” comports with the Secretary’s definition found under §602.3.
- The effectiveness of its selection criteria/controls to ensure that its public members satisfy the criteria for recognition.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- The agency’s definition of public member.
- Copy of policies, procedures on the selection and vetting process for public members.
- List of members of the decision-making body(ies) that identify the representatives of the public.
- Lists of appeal panel pools and/or appeals panels identifying the public members.
- Brief resumes.

§602.15(a) The agency has --

(6) Clear and effective controls against conflicts of interest, or the appearance of conflicts of interest, by the agency’s --

- (i) Board members;**
- (ii) Commissioners;**
- (iii) Evaluation team members;**
- (iv) Consultants;**
- (v) Administrative staff; and**
- (vi) Other agency representatives.**

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency’s written conflict-of-interest policies pertain to its appeals panel as well as to each group listed under (a)(6).
- That its policies include areas commonly identified as posing a conflict-of-interest, or the appearance of a conflict-of-interest.
- Demonstrating that the agency’s conflict-of-interest training is provided to each group listed under (a)(6), and to the members of the agency's appeals panel.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copies of relevant policies and evidence of the methods by which the agency implements its written conflict-of-interest policies, which may include signed conflict-of-interest statements, financial disclosure statements, and evidence of recusals due to conflicts-of-interest.

§602.15(b) The agency maintains complete and accurate records of --

(1) Its last full accreditation or preaccreditation review of each institution or program including on-site evaluation team reports, the institution's or program's responses to on-site reports, periodic review reports, any reports of special reviews conducted by the agency between regular reviews, and a copy of the institution's or program's most recent self-study; and

(2) All decisions *made throughout an institution's or program's affiliation with the agency* regarding the accreditation and preaccreditation of any institution or program *and substantive changes*, including all correspondence that is significantly related to those decisions.

General Guidance on §602.15(b):

All accrediting agencies are required to address this criterion with the following exception: Those agencies that (1) accredit only programs and are not required to have substantive change policies under §602.22, **and** (2) do not have mechanisms in place for the review and approval of substantive changes are not required to include substantive changes in their recordkeeping policies and procedures. However, if a solely programmatic accreditor does have mechanisms in place for the review and approval of substantive changes, it is expected, as good practice, that the accreditor keep those records in accordance with the requirements of this criterion and reflect such in its policies.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- How the agency's written records maintenance policy comports with the requirements.
- How the agency maintains all of the required records according to its written procedures, and where the records are kept.
- That the record of agency decisions on institutions/programs not granted accreditation or candidacy (for that period of time during which the institution/program had an affiliation with the agency) are retained by the agency for purposes of §§602.26(d) and 602.28(b)(2).

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copies of relevant policies and evidence that the required records are maintained and readily obtainable within a reasonable timeframe, including any records maintained off-site.

REQUIRED STANDARDS AND THEIR APPLICATION (§602.16 - §602.21)

General Guidance:

To become an accreditor recognized by the U.S. Secretary of Education, an agency's accreditation process must have effective mechanisms for evaluating an institution's or program's compliance with the agency's standards in accordance with commonly accepted accreditation practices/processes before reaching a decision to accredit or preaccredit the institution/program. Accepted accreditation practice/process requires all of the following components:

An **evaluation of an institution's or program's achievement of its stated educational objectives** via a non-governmental peer evaluation **using standards and procedures** that reflect a sound educational program.

An **in-depth self study** that includes an assessment of the institution's or program's educational quality and its continuing efforts to improve educational quality based on guidance provided by the agency.

An **on-site review** by an agency-selected team of peer evaluators during which the accrediting agency's on-site visit team obtains sufficient information to determine if the institution or program complies with the agency's standards, and a **site team report provided to the institution/program** with sufficient time for the institution/program to respond in writing to the report prior to the deliberation of the accreditation decision.

An **analysis/decision by the decision-making body** of all of the written materials and any other appropriate information available to it, preceding a decision which is based on the consistent application by the decision-making body of its published standards, and a **detailed report to the institution/program** assessing compliance with the agency's standards, including areas needing improvement; and the institution's or program's performance with respect to student achievement outcome.

A **comprehensive re-evaluation of the institution/program at established intervals** which includes all of the accreditation process components above.

On-going monitoring that includes monitoring of overall growth of institutions/programs it accredits and, at least annually, the collection of headcount enrollment data from its accredited institutions/programs as well as effectively applying a set of monitoring and evaluation approaches that identify problems with an institution's or program's continued compliance with agency standards and that takes into account institutional or program strengths and stability.

Enforcement of standards that requires the agency to take immediate action to terminate the accreditation when an institution or program is not in compliance with the agency standards or alternatively allows a limited period of time for the institution or programs to regain compliance.

Review of Standards is a set of requirements on agencies to ensure that the standards agencies use to evaluate their accredited institutions/programs continue to be adequate, relevant and appropriate to the type of training provided. As occupations evolve, through knowledge and technology, the measurements of a quality educational programs and educational delivery also must evolve.

§602.16 Accreditation and preaccreditation standards.**General Guidance on §602.16:**

Under these criteria, agencies are expected to demonstrate that their accreditation and preaccreditation standards are rigorous measurements of the quality of the educational institution or program in each required area. An agency that has established and applies the standards may establish any additional accreditation standards it deems appropriate.

In assessing this area, Department staff looks for--

- Whether the agency has written/published standards.
- How clearly, as written, do the standards describe the agency's expectations regarding the quality of an accredited institution or program.
- Whether the standard appears to be written with sufficient clarity and/or specificity to be understood by others. For agencies whose standards are cast as broad statements of principle or guidelines, does the agency have supplemental criteria that further define or describe the requirement? This may be found in other sections of the agency's materials, e.g., self-study guidelines.

Sample inquiry: Based on the written standards/criteria and any additional guidance provided by the agency, and in the context of generally accepted accrediting practice, would a person, reviewing the standards/criteria, be able to distinguish between an institution/program that would meet the agency's standards/criteria and one that would not?

- Whether the standards and criteria appear to be appropriate for the type of institution or educational program and level being accredited.

Sample inquiry: In the application of each area, does the agency appear to utilize expertise/procedures/criteria appropriate for evaluating postsecondary education?

- Whether there is a reasonable basis for concluding that the standard is an effective measure of quality of the institutional or programmatic characteristic it addresses.

Example: Analysis of a standard

An agency's faculty standard states: **"The program has adequate faculty."**

The agency has supplemental criteria attached to this standard that indicates that, for example:

- **Faculty members should have education credentials and/or documented experience in the content areas they teach, and**
- **There should be documented evidence of the involvement of faculty in curriculum planning and staff development.**

Analysis:

- * The standard is *written* -- a first step to ensuring consistency in application of the standards.
- * The supplemental criteria further define the agency's expectation and parameters, ensuring the standard is clear and assessable in a way that distinguishes between a program's faculty that meets the agency's expectation and one that does not.
- * The criteria also appear to be of sufficient rigor, reflecting commonly-accepted practice in postsecondary education, and are applicable across institutional/ program missions.

Institutional accreditors that are not Title IV gatekeepers (none of the institutions participate in Title IV, HEA programs) and programmatic accreditors that require their programs to be within institutions that are accredited by a nationally recognized institutional accrediting agency, are not required to have standards identified in 602.16 (a)(1)(viii) and 602.16 (a)(1)(x).

If the agency only accredits programs and does not serve as an institutional accrediting agency for any of those programs, its accreditation standards must address the areas in paragraph (a)(1) of this section in terms of the type and level of the program rather than in terms of the institution.

In accordance with §602.16(c), if the agency has or seeks to include within its scope of recognition the evaluation of the quality of institutions or programs offering distance education or correspondence education, the agency's standards must effectively address the quality of an institution's distance education or correspondence education in the areas identified in paragraph (a)(1) of this section. The agency is not required to have separate standards, procedures, or policies for the evaluation of distance education or correspondence education.

Review Elements:

In assessing this area (assessment/review of distance education), Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the agency applies the definitions of "distance education" and "correspondence education" found in §602.3 to determine which mode of delivery is being employed.
- How the agency demonstrates that it reviews the offerings of distance education and/or correspondence education to determine whether they meet the agency's standards.
- That the information provided by the agency explicitly describes the assessment of distance education or correspondence education as it pertains to each standard or criterion that might require the institution or program to use resources, procedures or structures different from those needed for resident program offerings. (Although separate standards/procedures/guidelines for the evaluation of distance education or correspondence education are not required by the regulations, they may be used.)

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample self-study demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site visit team evaluation reports demonstrating the evaluation of institutions/programs against the relevant standards.
- A copy of any written interpretations the agency publishes about its standards.
- A copy of any guidance to institutions/programs, team members, etc. on the standards and their application.
- A copy of any training materials the agency produces on its standards and their application.

§602.16 Accreditation and preaccreditation standards.

(a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if --

(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(i) Success with respect to student achievement in relation to the institution's mission, *which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.*

General Guidance on 602.16(a)(1)(i):

Nothing in paragraph (a) of this section restricts an accrediting agency from setting, with the involvement of its members, and applying accreditation standards for or to institutions or programs that seek review by the agency; or an institution from developing and using institutional standards to show its success with respect to student achievement, which achievement may be considered as part of any accreditation review.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the agency applies standards/criteria specific to student achievement that are appropriate to the educational mission(s) of the institutions/programs being evaluated.
- Whether the agency uses multiple methods/approaches for evaluating student achievement, including information external to the institution/program, as appropriate.
- Whether institutionally-developed standards to demonstrate student success are being used by the accreditor in the accreditation assessment, and if so, whether the agency has mechanisms in place to assess these standards in the context of the agency's standards for accreditation.
- Whether, and how, the agency evaluates any institutional data (both quantitative and qualitative) it collects in the context of compliance with agency accreditation standards.

Three examples of “qualitative” measures of assessment of student achievement—

Example 1 --

- Agency standard: Program demonstrates that students have acquired competency in the core skills of the occupation.
- One type of measurement indicator: Employer surveys indicate that students were well-prepared for entry level positions in their work place.
- Qualitative factor: Employer feedback indicating that students were well-prepared.

Example 2 --

- Agency standard: Program prepares students to conduct research in accordance with professional standards.
- One type of measurement indicator: Student theses or capstone research projects demonstrate an understanding of, and competency in, applying principles of ethical clinical research.
- Qualitative factor: The site evaluators' perusal of sample theses reflect that student projects adhere to APA or some other acknowledged model of ethical research.

Example 3 --

- Agency standard: Students completing an undergraduate degree program demonstrate collegiate-level writing skills.
 - One type of measurement indicator: Student senior theses demonstrate competency in structure and organization.
 - Qualitative factor: Visiting team review of a sample of faculty assessments of student theses using a writing rubric reflect that students are able to arrange ideas logically to support the central purpose or argument and link them to each other using smooth transitions.
- Whether and how accreditors of institutions/programs, that require licensure or certification for graduates to enter the occupation/ profession, consider this data in the evaluation of the program's/institution's success with respect to student achievement.
 - Whether and how accreditors of vocational institutions/programs include quantitative measures for completion, licensure and job placement at the program level.
 - For those accreditors whose accrediting standards for student achievement rely on accredited institutions to (1) demonstrate that the institution (on a recurring basis) collects student outcome data; (2) uses that data as part of conducting an institutional evaluation (assessment) of its success in meeting its institutional mission; and (3) uses the results of that evaluation in developing and implementing an institutional improvement plan --
 - Whether such accreditors are able to demonstrate that they have criteria/processes for evaluating the institutional assessment/improvement activity, such as criteria for evaluating the objectives/goals established by the institution; for assessing the data collection activities and improvement plans; and for assessing the outcomes resulting from implementation of the improvement plans.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards addressing institutional or program goals and objectives.
- Sample self-study demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site visit team evaluation reports demonstrating the evaluation of institutions/programs against the relevant standards
- An assessment of the institution's or program's performance with respect to student achievement.

- Outcomes assessment plan and results.
- Annual review of outcomes results.
- Decision letters demonstrating evaluation based on student achievement standards.
- A copy of any written interpretations the agency publishes about its standards.
- A copy of any guidance to institutions/programs, team members, etc. on the standards and their application.
- A copy of any training materials the agency produces on its standards and their application.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(ii) Curricula.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the standards address each degree level within the agency's scope of recognition, and the differentiation between degree levels (e.g., what distinguishes baccalaureate degrees from master's degrees, etc.)
- Whether distance education or correspondence education is offered, and if similar course content is covered whether it is delivered in a distance education or correspondence format or on the campus.
- Whether the standards established by the agency address, as appropriate --
 - Course sequencing.
 - A general education component.
 - Course content covering the major field of study.
 - Clearly stated objectives for courses.
 - The correlation of the curriculum to the mission of the institution.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(iii) Faculty.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the standards address faculty competence to teach assigned subjects, together with the requisite knowledge and skills to provide effective instruction.
- Whether training, earned degrees, scholarship, experience, and classroom performance or other evidence of teaching potential is expected for each offered credential/degree level.
- Whether the standards established by the agency address, as appropriate, factors such as --
 - Faculty role in the development and review of the curriculum.
 - Faculty evaluation, training and development.
 - Faculty work experience in lieu of education credentials.
 - Minimum faculty needed to meet the mission of the institution/program.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(iv) Facilities, equipment, and supplies.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the standards expect the maintenance of sufficient physical resources, including classroom/laboratory space and library offerings, to achieve the institutional or programmatic mission and goals.
- Whether the standards established by the agency address, as appropriate, factors such as --
 - Classrooms and laboratories have adequate space to accommodate students.
 - Sufficient equipment and supplies exist to support the program(s).
 - Written plans exist to maintain and upgrade facilities, equipment and supplies.
 - Institution/program budgets reflect resources allocated for facilities, equipment and supplies.
 - Facilities and equipment meet state and local safety and fire codes.
 - The technical infrastructure is adequate to ensure timely delivery of distance education and support services, and to accommodate current student numbers and expected near-term growth in enrollment.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(v) Fiscal and administrative capacity as appropriate to the specified scale of operations.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the standards expect institutions/programs to demonstrate financial stability and adequate administrative staff to operate effectively during any period of accreditation or preaccreditation granted.
- Whether the standards established by the agency address, as appropriate, factors such as --
 - Budgeting processes that demonstrate that current and future budgets are sufficient to allow accomplishment of the institution's/program's mission and goals.
 - Written policies that clearly delineate the duties and responsibilities of administrators.
 - Individuals in leadership and managerial roles, including those who oversee the fiscal and budget processes, are qualified by education and experience.
 - Stability in leadership and administrative operations

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards (e.g., the financial review section addressing recent financial audits).
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards (e.g., team review of financial audits).

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(vi) Student support services.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as

appropriate, aspects such as –

- Whether the standards expect institutions and programs to maintain effective student support services.
- Whether the standards established by the agency address, as appropriate, factors such as --
 - Expectations for academic advising and support systems that facilitate and encourage academic success.
 - The availability of support services relevant to the students enrolled, for example, financial aid guidance, personal counseling services, and/or employment assistance.
 - Processes that maintain and protect confidential student records, i.e., grades, test results, etc.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency’s relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency’s accreditation standards effectively address the quality of the institution or program in the following areas:

(vii) Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the standards expect that institutions and/or programs maintain and follow satisfactory policies regarding advertising and publications (including catalogs and academic calendars), recruiting, admissions, enrolling and grading students.
- Whether the standards established by the agency address, as appropriate, factors such as –
 - Ensuring that an institution’s/program’s policies conform with its educational mission and objectives.
 - The kinds of information institutions/programs may or must provide to the public regarding recruiting and admissions practices, academic calendars, catalogs, other publications, grading, and advertising.
 - Ensuring the accuracy, clarity, and accessibility of the material, including for vocational programs, requirements for entry into the field.
 - Recruiting methods.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(viii) Measures of program length and the objectives of the degrees or credentials offered.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the standards expect that institutions and/or programs demonstrate effective measures of program length in relation to the credential or degree objectives.
- Whether the standards established by the agency address, as appropriate, factors such as –
 - A published description of each degree/credential, together with the typical length of each program, including the minimum number/type of credits, courses and other requirements/prerequisites (i.e., occupational/professional experience or research, etc.) needed to obtain the credential/degree on a full-time basis or equivalent part-time study.
 - Length and increments of the academic year, i.e., semester, quarter, etc., and any established limits for program completion.
 - Ensuring that any awarded academic credits/degrees/credentials conform to commonly accepted practice, including time invested and content mastered.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(ix) Record of student complaints received by, or available to, the agency.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the agency has standards, processes, and/or procedures to assess if a pattern of student complaints exists that would bring into question the institution's/program's fulfillment of one or more of the agency's expectations.
- Whether the standards established by the agency address, as appropriate, factors such as –
 - Whether the institution/program and/or the agency is primarily responsible for maintaining the record of student complaints.
 - Whether the record of student complaints covers at least the most recent accreditation period, and includes information about how the complaints were resolved.
 - Whether the record of student complaints, wherever it is maintained, is made available to on-site evaluators for review.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

(x) Record of compliance with the institution's program responsibilities under Title IV of the Act, based on the most recent student loan default rate data provided by the Secretary, the results of financial or compliance audits, program reviews, and any other information that the Secretary may provide to the agency.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Mechanisms that are in place to incorporate information regarding an institution's deficiencies in its Title IV compliance (from compliance audits, program reviews, loan default rates, or other information the Secretary may have provided) in the evaluation process.
- Whether an institution's failure to resolve the identified deficiencies in a timely manner calls into question the institution's ability to meet the agency's relevant standards.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copy of the agency's relevant standards excerpt(s).
- Sample self-study excerpt(s) demonstrating that the agency expects institutions/programs to address the relevant standards.
- Sample site evaluation report excerpt(s) demonstrating the evaluation of institutions/programs against the relevant standards.

§602.16(a)(2) The agency's preaccreditation standards, if offered, are appropriately related to the agency's accreditation standards and do not permit the institution or program to hold preaccreditation status for more than five years.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The relationship between agency's standards for preaccreditation and its accreditation standards, including standards for candidacy that relate to each accreditation standard.
- That the relationship between the preaccreditation and accreditation requirements support a reasonable conclusion that preaccredited institutions will achieve full compliance with agency standards within the period of preaccreditation the agency allows.
- Preaccreditation timeframes that do not exceed the maximum limits of the criteria -- longer than five years.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- The relevant agency policy.
- Sample letter(s) granting preaccreditation.
- Sample decision-meeting minutes.
- Directory listing preaccredited and accredited institutions/programs.

(NOTE: §§602.16 (b), (d), (e) and (f) are instructions. Discussion of §602.16(c) is included in the General Guidance on §602.16)

§602.17 Application of standards in reaching an accrediting decision.

The agency must have effective mechanisms for evaluating an institution's or program's compliance with the agency's standards before reaching a decision to accredit or preaccredit the institution or program. The agency meets this requirement if the agency demonstrates that it--

(a) Evaluates whether an institution or program--

(1) Maintains clearly specified educational objectives that are consistent with its mission and appropriate in light of the degrees or certificates awarded;

(2) Is successful in achieving its stated objectives; and

(3) Maintains degree and certificate requirements that at least

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency has a standard or guidance that expects an institution or program to have a written mission.
- The agency identifies how it determines that an institution or program is successful in achieving its objectives in light of the certificates/degrees offered, including the use of key indicators that are appropriate to the institution's/program's objectives and mission, such as enrollment data, retention rates, graduation rates, course completion rates, licensure and certification pass rates, and student portfolios or other means of demonstrating achievement of objectives/competencies.
- There is evidence that the agency evaluates its institutions/programs to ensure that degree and/or certificate requirements at least conform to commonly accepted standards.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Evaluator training/self-study guidance showing how the agency's standards should be applied in evaluating an entity's mission and educational objectives, together with relevant excerpt(s) from a self-study and a site visit team report.
- Agency guidance regarding degree and/or certificate requirements.
- Relevant agency action/decision letter excerpt(s).

§602.17(b) Requires the institution or program to prepare, following guidance provided by the agency, an in-depth self-study that includes the assessment of educational quality and the institution's or program's continuing efforts to improve educational quality.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Written agency guidance on how each institution/program conducts a comprehensive self-study (not simply a checklist) of its operations, and involves key stakeholders.
- Whether the self-assessment describes the institution's/program's strengths and weaknesses, as well as how it complies with the agency's standards.
- The timeliness of the completion and submission of the self-study prior to the site visit for the agency and site evaluators to review for completeness and compliance with the agency's standards.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Self-study guidance and sample self-study excerpt(s) based on agency guidance.
- If applicable, training provided on self-study preparation and sample agency feedback regarding submitted self-studies.

§602.17(c) Conducts at least one on-site review of the institution or program during which it obtains sufficient information to determine if the institution or program complies with the agency's standards.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The size, composition, purpose, responsibilities, and training of the site team and the duration of the site visit, to conduct a thorough review prior to the accreditation decision.
- The written protocol for conducting site team reviews to verify information in the self-study.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Training guide for site visit team evaluators.
- Rubrics or other tools used by evaluators to guide the on-site review.
- Sample site visit team report excerpt(s).
- Sample evaluation(s) by institutions/programs regarding the site visit reviewers.

§602.17(d) Allows the institution or program the opportunity to respond in writing to the report of the on-site review.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency’s written policies and procedures for ensuring that an institution/program has an opportunity to review and respond to the report of the on-site review.
- The agency’s mechanisms for ensuring a reasonable amount of time for the institution/program to respond to the team report.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Relevant portion of the agency’s written policies/procedures.
- Sample communication(s) between the agency and the institution/program regarding the ability to provide a written response to the report of the site visit team.
- Sample response(s) from institutions/programs regarding the site visit team evaluation report.

§602.17(e) Conducts its own analysis of the self-study and supporting documentation furnished by the institution or program, the report of the on-site review, the institution’s or program’s response to the report, and any other appropriate information from other sources to determine whether the institution or program complies with the agency's standards.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects to the decision-making process such as –

- The level of involvement of the members of the agency’s final decision-making body(ies) in the analysis of the documentation when reaching an accrediting decision and the mechanisms used to ensure that “rubber stamping” another group’s findings, such as the on-site evaluators or an agency review committee, is avoided.
- The decision-making body's(ies') processes and level of deliberations that ensure that institutions/programs comply in substance with agency requirements prior to accrediting an institution/program and there is no substantial reliance on corrective actions to bring an institution/program into compliance **after** it receives accreditation.
- The agency’s comprehensive review of every institution/program seeking initial accreditation to include those institutions/programs that are currently accredited by another recognized accreditor, in which case, the decisionmaker will also take into consideration the findings and accreditation history of the institution/program. The Secretary’s Criteria do not recognize “transfer” of accreditation.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample accreditation action letter(s), site visit team evaluation report(s) and decision-making meeting minutes.
- If applicable, documentation of other deliberations from any subcommittee that reviews institution/program information.
- Policies and procedures for reviews and decision-making.

§602.17(f) Provides the institution or program with a detailed written report that assesses --

(1) The institution's or program's compliance with the agency's standards, including areas needing improvement; and

(2) The institution or program's performance with respect to student achievement.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency's consistent application of written policies and procedures for the timely issuance of comprehensive site visit evaluation reports that are clearly linked to the agency's standards.
- Demonstrating the agency's mechanisms and instruments and consistent application for providing the required detailed assessment through, for example, the team report, the action letter, a combination thereof, or a different written document. If the agency does not provide the required detailed assessment in a single document, a clear indication of where the required components are to be found.
- Procedures, as appropriate, for assessing and detailed reporting on the agency's assessment of institutionally-set standards for success with respect to student achievement, for adequacy of the self-identified standards and the evidence provided by the institution/program.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample report excerpt(s) or any other correspondence by which the agency informs the program/institution of the agency's assessment of compliance with the agency standards;
- Agency policy/procedures manual excerpt(s).
- Sample student outcomes analysis.

§602.17(g) Requires institutions that offer distance education or correspondence education to have processes in place through which the institution establishes that the student who registers in a distance education or correspondence education course or program is the same student who participates in and completes the course or program and receives the academic credit. The agency meets this requirement if it --

(1) Requires institutions to verify the identity of a student who participates in class or coursework by using, at the option of the institution, methods such as --

(i) A secure login and pass code;

(ii) Proctored examinations; and

(iii) New or other technologies and practices that are effective in verifying student identity; and

(2) Makes clear in writing that institutions must use processes that protect student privacy and notify students of any projected additional student charges associated with verification of student identity at the time of registration or enrollment.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- Whether the agency’s written policies and procedures address this student verification requirement.
- The agency’s assessment of the application and the effectiveness of each entity’s process for verifying the identity of students taking distance education or correspondence education courses.
- The agency’s confirmation that the verification processes used to protect student privacy are adequate and effective.
- The agency’s confirmation that the institution/program notifies students at the time of registration or enrollment of any additional charges related to verification of student identity.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Sample site team report excerpt(s).
- Training materials that address student verification and privacy
- The agency’s written policies and procedures on verification of student identity.

§ 602.18 Ensuring consistency in decision-making.

The agency must consistently apply and enforce standards *that respect the stated mission of the institution, including religious mission, and that ensure that the education or training offered by an institution or program, including any offered through distance education or correspondence education, is of sufficient quality to achieve its stated objective for the duration of any accreditation or preaccreditation period granted by the agency. The agency meets this requirement if the agency --*

(a) *Has written specification of the requirements for accreditation and*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- How it demonstrates that the agency’s written policies and procedures ensure consistency in the application of its standards, in a manner that is respectful of the mission of the institution that is being evaluated.
- Evidence that the agency’s standards, criteria, guidelines, policies and procedures are in writing, readily available, and easily understood and unambiguously affirm respect for institutional mission in its application and enforcement of its standards.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- The agency's policy related to how it applies and enforces its standards that clearly articulates the principle of respect for the mission of the institution.
- Demonstrated availability of agency standards, criteria, etc, such as links to relevant sections on the agency’s website.
- The agency’s standards and policies manual(s).
- Sample(s) of significant correspondence from institutions/programs (seeking accreditation or under review) commenting on the clarity of the agency's standards/criteria.

§ 602.18(b) *Has effective controls against the inconsistent application of the agency’s standards.*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate –

- The controls/practices it applies that are effective in ensuring consistency in decision-making. These may include components/controls/practices such as--
 - Training site visitors/team chairs on how to evaluate an entity against agency standards, within the context of the mission of the institution.

- Training members of the agency's decision-making body(ies) on what is required to demonstrate compliance with agency standards.
- Providing written guidance to institutions/programs on what is required to demonstrate compliance.
- Allowing institutions/programs to provide a written response to site visit team reports.
- Allowing institutions/programs to provide oral comments at decision-making meetings regarding their compliance with the standards.
- Having different groups within its decision-making body(ies) evaluate the same institution or program to see if they come to the same conclusions regarding compliance.
- Providing agency staff members as a resource for on-site team members to answer questions on applying the standards.
- Reviewing accrediting decisions, and the rationales for making those decisions, to ensure that the agency consistently applies its standards in making decisions.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample response(s) to team report.
- Agenda(s) showing agency activities conducted to ensure the consistent application of standards.
- Agency policies that directly relate to the consistent application of agency standards.
- Specific materials provided to institutions/programs, site visit evaluators, team chairs and decision-makers regarding what is essential to establish compliance with the standards.

§ 602.18(c) Bases decisions regarding accreditation and preaccreditation on the agency's published standards.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency's consistent use of published standards to accredit its institutions/programs.
- How the agency applies consistency in its decision-making with respect to agency expectations regarding academic quality, in instances when it is making a determination from institution-set student achievement standards.
- The mechanisms and safeguards the agency applies to ensure there is no application of requirements or standards apart from its published standards to any institution or program when making accrediting decisions.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample decision letter(s), including adverse accrediting decisions, that cite the specific standard violated and the rationale for the finding;
- Sample site visit team evaluation report excerpt(s).

- Excerpt(s) of decision meeting minutes that demonstrate how accrediting decisions are made.
- Any significant correspondence commenting on the agency's consistency (or lack of it).

§602.18(d) Has a reasonable basis for determining that the information the agency relies on for making accrediting decisions is accurate.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The collection of information during its accrediting reviews that is sufficient information on which to make accrediting determinations.
- How the information relied upon by the agency is substantially verified for accuracy (e.g., by comparisons with documents submitted by institutions/programs with their self-studies, documents reviewed onsite, and interviews with staff/faculty/students during site visits).

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Agency policies/procedures ensuring that on-site teams collect reasonably verifiable information and also verify that the information provided by the institution/program (used in determining compliance) is trustworthy.
- Evidence that the self-studies include documentation that adequately supports the narratives.

§602.18(e) *Provides the institution or program with a detailed written report that clearly identifies any deficiencies in the institution's or program's compliance with the agency's standards.*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate –

- How agency reports are comprehensive in clearly indicating any/all areas of non-compliance with each of the agency's standards when the institution or program does not meet agency expectations.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample site visit team report excerpt(s), or any other correspondence or report by the agency, to inform the program/institution of any deficiencies in the institution's/program's compliance with the agency's standards;
- Sample agency action letter excerpt(s).

§602.19 Monitoring and reevaluation of accredited institutions and programs.

(a) The agency must reevaluate, at regularly established intervals, the institutions or programs it has accredited or preaccredited.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- That it has, and follows, written policies and procedures for the reevaluation of its programs/institutions for continued accreditation or preaccreditation that are the same as those outlined in §602.17.
- The agency's policies identify established timelines, as appropriate to the type of accreditation, in which the agency reevaluates its programs/institutions on a regular and consistent basis.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample letter(s) and site visit evaluation report excerpt(s).
- List of institutions/programs clearly indicating the date of their accreditation, re-accreditation, review, or other activity.

§602.19(b) The agency must demonstrate it has, and effectively applies, a set of monitoring and evaluation approaches that enables the agency to identify problems with an institution's or program's continued compliance with agency standards and that takes into account institutional or program strengths and stability. These approaches must include periodic reports, and collection and analysis of key data and indicators, identified by the agency, including, but not limited to, fiscal information and measures of student achievement, consistent with the provisions of §602.16(f). This provision does not require institutions or programs to provide annual reports on each specific accreditation criterion.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as whether –

- The agency has written policies and procedures for monitoring its accredited members.
- The agency's policies and procedures specify the set of monitoring and evaluation approaches it uses to identify problems at institutions or programs with different strengths and stability.
- The agency identifies the types of periodic reports it obtains and the other activities that it conducts in monitoring its accredited institutions/programs (e.g., annual reports, mid-term site visits, or special reports relating to an entity's compliance with the standards).

- The agency demonstrates that it *collects and analyzes* information, including agency-defined key data and indicators, on a recurring basis at intervals that are appropriate to the agency standards; and the key data and indicators include fiscal and student achievement information.
- The agency demonstrates that its monitoring policies are effective in enabling the agency to avoid overlooking data indicative of significant compliance problems.
- The agency demonstrates that it evaluates the data gathered against agency-developed performance indicators of continued compliance (e.g., red flags).
- The agency's policies identify the follow-up actions it takes in typical circumstances based on its monitoring activities.
- Monitoring includes procedures for conducting special evaluations or site visits, and the agency takes follow-up actions as appropriate.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Written policies/procedures regarding monitoring activities.
- Sample excerpt(s) from relevant agency letters, decision-making minutes and site visit team evaluation reports or other evidence that demonstrates the agency analyzes the information it gathers through reports, visits, and other means.
- Data samples gathered throughout the period of accreditation, and if applicable, annual reports and mid-point evaluation reports.
- Example(s) of significant compliance problems noting how they were identified by the agency.

§602.19(c) Each agency must monitor overall growth of the institutions or programs it accredits and, at least annually, collect headcount enrollment data from those institutions or programs.

This section applies to all agencies.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency's written policies and procedures address the collection of headcount enrollment data at least annually from the institutions/programs it accredits.
- Agency protocols and demonstrations of its evaluation of the enrollment data as part of its ongoing monitoring.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Copies of policies and procedures.
- Samples of data gathered annually.

- Sample excerpt(s) from relevant agency letters, decision-making minutes and site visit team evaluation reports or other evidence that demonstrates the agency analyzes the information it gathers through reports, visits, and other means.

§602.19(d) Institutional accrediting agencies must monitor the growth of programs at institutions experiencing significant enrollment growth, as reasonably defined by the agency.

This section applies to institutional accrediting agencies. It does not apply to programmatic accrediting agencies that accredit free-standing institutions unless the institution offers more than one program.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as--

- How the agency has defined what constitutes "significant growth" which may take into account different determinations of what constitutes "significant growth" for different categories of institutions, or it may establish a single criterion.
- How the agency monitors growth, by program, at institutions it has identified as having significant growth.
- Agency plans/protocols for monitoring and/or communicating to others, as appropriate, situations of significant growth.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate--

- Copies of policies and procedures.
- Samples of data gathered annually.
- Sample excerpt(s) from correspondence with accredited entities found to be experiences significant growth.

§602.19(e) Any agency that has notified the Secretary of a change in its scope in accordance with §602.27(a)(5) must monitor the headcount enrollment of each institution it has accredited that offers distance education or correspondence education. If any such institution has experienced an increase in headcount enrollment of 50 percent or more within one institutional fiscal year, the agency must report that information to the Secretary within 30 days of acquiring such data.

General Guidance for §602.19(e):

This requirement applies only to institutional accrediting agencies and specialized accrediting agencies that accredit freestanding institutions that have changed their scope of accreditation to include distance education or correspondence education by written notification to the Secretary.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as

appropriate –

- The agency’s application of its written policies and protocols for collecting and analyzing headcount enrollment data annually, by institution fiscal year, from the institutions it accredits that offer distance education or correspondence education.
- Agency protocols for determining headcount increases in enrollment of 50% or more within an institution fiscal year.
- Demonstration of agency reporting each headcount enrollment increase within 30 days of learning of it.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Policies/procedures for collecting and reviewing enrollment data.
- If appropriate, correspondence to the Secretary demonstrating timely reporting.

§602.20 Enforcement of standards.

(a) If the agency’s review of an institution or program under any standard indicates that the institution or program is not in compliance with that standard, the agency must --

(1) Immediately initiate adverse action against the institution or program; or

(2) Require the institution or program to take appropriate action to bring itself into compliance with the agency’s standards within a time period that must not exceed –

(i) Twelve months, if the program, or the longest program offered by the institution, is less than one year in length;

(ii) Eighteen months, if the program, or the longest program offered by the institution, is at least one year, but less than two years, in length; or

(iii) Two years, if the program, or the longest program offered by the institution, is at least two years in length.

General Guidance for §602.20:

For the purposes of meeting the regulatory requirement, an adverse action is defined as limited to denying, withdrawing, suspending, revoking, or terminating the accreditation of an institution or program. Probation is not considered an adverse action.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, whether –

- The agency's written policy requires its institutions/programs to come into compliance with the agency's standards when it determines that the institution/program fails to comply with those agency's standards.
- The policy clearly states the maximum time allowed for institutions/programs to come into compliance; and the maximum time allowed conforms to this section of the regulations which is determined by the longest program offered at an institution. The "clock" starts when the institution or program is notified by the agency that it is out of compliance with a standard.
- An agency may either take an immediate adverse action to enforce its standards OR allow the institution/program time, up to the stated maximum, to come into compliance.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample excerpt(s) from letters, meeting minutes, etc. showing that the agency has taken timely adverse action, including the outcome.
- Proportion of accredited entities currently required to report back to the agency, together with the name of each entity, a timeline identifying when the key issue(s) arose and what is being required of each institution/program.

§602.20(b) If the institution or program does not bring itself into compliance within the specified period, the agency must take immediate adverse action unless the agency, for good cause, extends the period for achieving compliance.

General Guidance for §602.20(b):

An agency's policy may extend the period for achieving compliance for good cause, however, extensions for good cause are not to be used routinely, repeatedly, or as a mechanism to avoid initiating an adverse action.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects/factors such as –

- The agency considerations in granting a good cause extension, to include, for example
 - The length of time for the extension.
 - Rationale for granting or denying the extension.
 - Typical criteria for determining whether an extension will be granted.
 - Limitations on further extension to an existing extension, limits on the frequency and use of "good cause."
 - Provisions for monitoring the progress of an institution/program that has received an extension for good cause.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample excerpt(s) from relevant letters, meeting minutes or hearings, etc.

§602.21 Review of standards.

(a) The agency must maintain a systematic program of review that demonstrates that its standards are adequate to evaluate the quality of the education or training provided by the institutions and programs it accredits and relevant to the educational or training needs of students.

(b) The agency determines the specific procedures it follows in evaluating its standards, but the agency must ensure that its program of review --

(1) Is comprehensive;

(2) Occurs at regular, yet reasonable, intervals or on an ongoing basis;

(3) Examines each of the agency's standards and the standards as a whole; and

(4) Involves all of the agency's relevant constituencies in the review and affords them a meaningful opportunity to provide input into the review.

General Guidance for §602.21(a) and (b):

There is a distinction between the standards REVIEW PROCESS requirement of §602.21(a) and (b), and the standards ADOPTION PROCESS requirement of §602.21(c). Sections 602.21(a) and (b) require the agency to gather information from its communities of interest regarding whether the standards should be changed BEFORE developing draft changes to the standards.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that –

- The agency has a written policy requiring it to maintain a systematic program of review of its standards.
- The agency demonstrates that its program of review is systematic and focuses on the adequacy and relevance of its standards in terms of enabling the agency to evaluate educational quality.
- The agency demonstrates that it collects sufficient information to determine whether its standards can be used to evaluate the quality of education offered through its accredited institutions/programs.
- The review process occurs at reasonable intervals.
- The review process used by the agency evaluates all of the standards individually and as a whole.
- The agency demonstrates that it collects information from several sources and seeks input from its communities of interest, including internal and external constituencies.
- The agency describes the activities it conducts as part of its review process, e.g., conducting surveys, holding forums with its communities of interest, establishing committees to review the standards, etc. and how it involves its different constituencies.
- The agency demonstrates that it has evaluated the information it gathered in its review in order to determine whether the standards need to be changed.

- The agency demonstrates that the review process could lead to the improvement of the standards, e.g., new standards were drafted or modifications made to existing standards.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample survey(s) completed.
- Agendas and/or minutes of meetings held to evaluate the standards and showing the active involvement of constituents.
- Report(s) generated regarding the review of standards.

§602.21(c) If the agency determines, at any point during its systematic program of review, that it needs to make changes to its standards, the agency must initiate action within 12 months to make the changes and must complete that action within a reasonable period of time. Before finalizing any changes to its standards, the agency must --

(1) Provide notice to all of the agency’s relevant constituencies, and other parties who have made their interest known to the agency, of the changes the agency proposes to make;

(2) Give the constituencies and other interested parties adequate opportunity to comment on the proposed changes; and

(3) Take into account any comments on the proposed changes submitted timely by the relevant constituencies and by other interested parties.

General Guidance for §602.21(c).

There is a distinction between the standards REVIEW PROCESS requirement of §602.21(a) and (b), and the standards ADOPTION PROCESS requirement of §602.21(c). Section 602.21(c) is the process that is used AFTER draft changes to the standards have been developed.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that –

- The agency’s written policy directs it to initiate action to make the necessary changes within 12 months after determining that, as a result of the review process, changes to standards are needed.
- The agency’s written policy directs it to notify its communities of interest of proposed changes to the standards, and allows them a reasonable amount of time to comment on the proposed changes.
- The agency encourages its communities of interest (internal and external), including those that have made their interest known, to comment on proposed changes.
- The agency demonstrates that it reviews all comments submitted in a timely manner before formally adopting the proposed changes as final.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample responses received from its communities of interest.
- Evidence that changes were made to proposed standards as a result of reviewing the received comments.
- Evidence demonstrating that its communities of interest have been notified of proposed changes to the standards.
- Evidence showing the agency carefully considered all responses received from its communities of interest regarding proposed changes to the standards.
- Evidence showing the agency's action to change the standards occurred within the 12 month timeframe outlined in this section.

REQUIRED OPERATING POLICIES AND PROCEDURES **(§602.22 - §602.28)**

General Guidance:

A recognized accrediting agency is expected to adhere to principles of transparency in its activities and demonstrate regard for the decisions of other recognized accreditors. More specifically, it is expected to make information regarding its accreditation processes, policies, and standards, and requirements and accreditation decisions publicly available. As well, it is expected to make available to the public, information regarding the names, academic and professional qualifications, relevant employment and organizational affiliations of its policy- and decision- making members and principal administrative staff. It is expected to make public the names of its accredited members, and the year it will next review the institution/program for accreditation. Further, it is expected to review and evaluate substantive changes in its institutions rather than having them automatically included in a prior accreditation decision.

A recognized accreditor is expected to be responsive to its members, the public, other accreditors, and to state and federal agencies with which it and its accredited programs interface. For example, it is expected to develop and adhere to policies and procedures for the review of complaints it receives about its accredited programs and any complaints regarding the agency itself. It is expected to provide accredited members with due process in initiating/taking any adverse action relative to its accreditation status and make written notification to other accreditors, the Secretary of Education, the public, and other state agencies, as appropriate, on its accrediting decisions as outlined in the regulations.

Substantive change requirements are required of agencies that accredit institutions.

§602.22 Substantive change.

(a) If the agency accredits institutions, it must maintain adequate substantive change policies that ensure that any substantive change to the educational mission, program, or programs of an institution after the agency has accredited or preaccredited the institution does not adversely affect the capacity of the institution to continue to meet the agency's standards. The agency meets this requirement if—

(1) The agency requires the institution to obtain the agency's approval of the substantive change before the agency includes the change in the scope of accreditation or preaccreditation it previously granted to the institution.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that –

- The agency has written substantive change policies and procedures for requesting approvals based on evidence that the proposed change does not adversely affect the capacity of the institution to continue to meet the agency's standards.
- The agency's procedures clarify that the decision-making body approves the change with written notification prior to including it in the institution's grant of accreditation.
- The agency has clearly written protocols that are specific in describing the depth and breadth of its assessment, approval, and/or monitoring procedures for all of the types of substantive changes required by the criterion.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Form(s) or other documents regarding the application for approval and evidence of the application of the agency's review and approval procedures for various types of required substantive change requests.
- Sample approval/disapproval letter(s).
- Meeting minutes or hearing agendas, etc. related to this section.

The following types of substantive change are required of all agencies that accredit institutions.

§602.22(a)(2) The agency's definition of substantive change includes at least the following types of change:

- (i) Any change in the established mission or objectives of the institution.
- (ii) Any change in the legal status, form of control, or ownership of the institution.
- (iii) The addition of courses or programs that represent a significant departure *from existing offerings of educational programs*, or method of delivery, from those that were offered when the agency last evaluated the institution.
- (iv) The addition of programs *of study* at a degree or credential level *different from* that which is included in the institution's current accreditation or preaccreditation.
- (v) A change from clock hours to credit hours.
- (vi) A substantial increase in the number of clock or credit hours awarded for successful completion of a program.

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(NOTE: Paragraphs (vii) and (viii) are discussed in the following section since they specifically apply to Title IV accreditors)

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(ix) *The acquisition of any other institution or any program or location of another institution.*

(x) *The addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study.*

In addition, the following types of substantive change requirements also apply to all agencies

whose accreditation of an institution enables the institution to seek eligibility to participate in Title IV, HEA programs. Agencies are NOT required to establish a process for the pre-approval of additional locations as outlined in 602.22(a)(2)(viii)(A).

§602.22(a)(2) continued—

(vii) If the agency's accreditation of an institution enables the institution to seek eligibility to participate in Title IV, HEA programs, the entering into a contract under which an institution or organization not certified to participate in the Title IV, HEA programs offers more than 25 percent of one or more of the accredited institution's educational programs.

(viii)(A) If the agency's accreditation of an institution enables it to seek eligibility to participate in Title IV, HEA programs, the establishment of an additional location geographically apart from the main campus at which the institution offers at least 50 percent of an educational program. The addition of such a location must be approved by the agency in accordance with paragraph (c) of this section unless the accrediting agency determines, and issues a written determination stating that the institution has--

- (1) Successfully completed at least one cycle of accreditation of maximum length offered by the agency and one renewal, or has been accredited for at least ten years;*
- (2) At least three additional locations that the agency has approved; and*
- (3) Met criteria established by the agency indicating sufficient capacity to add additional locations without individual prior approvals, including at a minimum satisfactory evidence of a system to ensure quality across a distributed enterprise that includes --*
 - (i) Clearly identified academic control;*
 - (ii) Regular evaluation of the locations;*
 - (iii) Adequate faculty, facilities, resources, and academic and student support systems;*
 - (iv) Financial stability; and*
 - (v) Long-range planning for expansion.*

(B) The agency's procedures for approval of an additional location, pursuant to paragraph (a)(2)(viii)(A) of this section, must require timely reporting to the agency of every additional location established under this approval.

(C) Each agency determination or redetermination to preapprove an institution's addition of locations under paragraph (a)(2)(viii)(A) of this section may not exceed five years.

(D) The agency may not preapprove an institution's addition of locations under paragraph (a)(2)(viii)(A) of this section after the institution undergoes a change in ownership resulting in a change in control as defined in 34 CFR 600.31 until the institution demonstrates that it meets the conditions for the agency to preapprove additional locations described in this paragraph.

(E) The agency must have an effective mechanism for conducting, at reasonable intervals, visits to a representative sample of additional locations approved under paragraph (a)(2)(viii)(A) of this section.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that –

- The agency's substantive change policies include comprehensive definitions for all of the types of substantive changes required for the agency identified in subsection (a)(2).
- The agency has clearly written protocols that are specific in describing the depth and breadth of its assessment, approval, and/or monitoring procedures for all of the types of substantive changes required by this section.
- The agency's substantive change policies follow the Criteria concerning "additional locations" for *any* geographically-separate campus where at least 50 percent of an educational program is offered, regardless of agency definitions that may use different or multiple terms in referring to this group of campuses.
- If the agency chooses to establish an approval approach for "additional locations" that may, in appropriate circumstances, apply in lieu of the pre-approval process described in §602.22(c), the alternative approval approach includes the following factors:
 - Applies only to institutions that it has determined meet the requirements of §602.22(a)(viii)(A)(1) through (3).
 - Requires timely reporting to the agency of the establishment of every new location.
 - Grants the prior approval for locations added during no more than a five-year period.
 - Suspends the pre-approval if an institution undergoes a change in ownership resulting in a change in control, unless and until such time as the agency re-determines that the institution continues to meet the conditions for the agency to pre-approve additional locations.
 - Includes viable plans for conducting, during the accreditation cycle, site visits at a representative sample of added locations (and includes the basis on which the representative sample is established and the criteria for scheduling visits).
 - Demonstrates that it collects sufficient information from an institution opening an additional location to ensure that a quality education is being offered at the new location.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Sample application(s) from institutions requesting a substantive change (each type).
- Agency reviews of substantive change requests with approval/disapproval letters, and any relevant site visits conducted.
- Evidence of the agency's process for granting prior approval of additional locations without a site-by-site application, including sample written determinations of institutions meeting the conditions to add new locations without prior site-by-site approvals, and an institution's timely notification of relevant additions.

§602.22(a)(3) *The agency's substantive change policy must define when the changes made or proposed by an institution are or would be sufficiently extensive to require the agency to conduct a new comprehensive evaluation of that institution.*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- What quality control mechanisms are in place enabling the agency to assess multiple substantive change requests from an institution, either individually and/or holistically, as appropriate,
- The considerations/factors the agency has established as a component of its policy/protocols and which it applies in identifying, assessing and determining that changes are sufficiently extensive to require the agency to conduct a new comprehensive review of that institution.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Examples of proposed changes requiring a new comprehensive evaluation of an institution, if any.
- Substantive change requests
- Copies of protocols and documentation of evaluations of substantive changes

§602.22(b) *The agency may determine the procedures it uses to grant prior approval of the substantive change. However, these procedures must specify an effective date, which is not retroactive, on which the change is included in the program's or institution's accreditation. An agency may designate the date of a change in ownership as the effective date of its approval of that substantive change if the accreditation decision is made within 30 days of the change in ownership. Except as provided in paragraph (c) of this section, these procedures may, but need not, require a visit by the agency.*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that –

- Agency approval of substantive change requests clearly designate an effective date for the substantive change to be included in the agency's grant of accreditation.
- Substantive change approvals are not applied retroactively (except as provided with respect to changes of ownership).
- The agency documents in writing to the institution and the Office of Federal Student Aid, its review/approval/inclusion of the substantive change in the grant of accreditation.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Samples of substantive change requests.
- Sample approvals and disapprovals.

§602.22(c) *Except as provided in (a)(2)(viii)(A) of this section, if the agency’s accreditation of an institution enables the institution to seek eligibility to participate in Title IV, HEA programs, the agency’s procedures for the approval of an additional location where at least 50 percent of an educational program is offered must provide for a determination of the institution’s fiscal and administrative capacity to operate the additional location. In addition, the agency’s procedures must include--*

(1) A visit, within six months, to each additional location the institution establishes, if the institution--

(i) Has a total of three or fewer additional locations;

(ii) Has not demonstrated, to the agency’s satisfaction, that it has a proven record of effective educational oversight of additional locations; or

(iii) Has been placed on warning, probation, or show cause by the agency or is subject to some limitation by the agency on its accreditation or preaccreditation status;

(2) An effective mechanism for conducting, at reasonable intervals, visits to a representative sample of additional locations of institutions that operate more than three additional locations; and

(3) An effective mechanism, which may, at the agency’s discretion, include visits to additional locations, for ensuring that accredited and preaccredited institutions that experience rapid growth in the number of additional locations maintain educational quality.

(d) The purpose of the visits described in paragraph (c) of this section is to verify that the additional location has the personnel, facilities, and resources it claimed to have in its application to the agency for approval of the additional location

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that –

- The agency has a procedure for the review and approval of the establishment of additional locations (where at least 50 percent of an educational program is offered) prior to including the location in its accreditation. As part of that process, the agency reviews whether the

- institution has sufficient fiscal and administrative resources to operate an additional location.
- Agency policies for the establishment of additional locations direct the agency to conduct a site visit to the first three additional locations within six months of opening the locations.
 - Regardless of the number of additional locations an institution has established, the agency visits any new additional locations if the institution opening the additional location has not shown effective oversight of previously-opened additional locations, or if the agency has placed the institution on warning, probation, or a show cause order or other limitation.
 - The agency has effective written criteria and procedures for monitoring the rapid growth in additional locations to ensure quality.
 - The agency has viable written plans for conducting site visits to a representative sample of additional locations during the accreditation cycle when it accredits institutions that open multiple (more than three) additional locations, and for ensuring quality at institutions experiencing rapid growth. The plans include the basis on which the representative sample is established, the criteria for the scheduling and timing of visits to locations, and the mechanism used to ensure institutions experiencing rapid growth maintain educational quality.
 - The agency visits additional locations to verify that the location has the personnel, facilities and resources described in the institution's application for approval of the addition of the location(s).
 - The agency collects sufficient information from an institution opening an additional location to ensure that a quality education is being offered at the new location.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Site visit team report(s).
- Application from institution seeking to add individual additional location(s).
- Evidence of the agency review of applications to add individual additional locations, including approval/disapproval letter(s).
- Copy of agency plan for conducting site visits to a representative sample of additional locations that includes criteria for the scheduling and timing (reasonable intervals) of visits.

§602.23 Operating procedures all agencies must have-

(a) The agency must maintain and make available to the public written materials describing --

- (1) Each type of accreditation and preaccreditation it grants;**
- (2) The procedures that institutions or programs must follow in applying for accreditation or preaccreditation;**
- (3) The standards and procedures it uses to determine whether to grant, reaffirm, reinstate, restrict, deny, revoke, terminate, or take any other action related to each type of accreditation and preaccreditation that the agency grants;**
- (4) The institutions and programs that the agency currently accredits or preaccredits and, for each institution and program, the year the agency will next review or reconsider it for accreditation or preaccreditation; and**
- (5) The names, academic and professional qualifications, and relevant employment and organizational affiliations of --**
 - (i) The members of the agency's policy and decision-making bodies; and**
 - (ii) The agency's principal administrative staff.**

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that –

- The agency's written policies and procedures for maintaining and making available to the public includes at least all of the information required by and listed in (a)(1) through (a)(5).
- Its published list(s) of preaccredited and accredited institutions/programs also specify the type of accreditation granted.
- Its information is accurate, up-to-date, and easily accessible to the public, to include the information provided on the agency's website.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Examples of each type of information and its location, as applicable.
- Sample accreditation letters that specify the type of accreditation granted, if the agency grants different types of accreditation.

§602.23(b) In providing public notice that an institution or program subject to its jurisdiction is being considered for accreditation or preaccreditation, the agency must provide an opportunity for third-party comment concerning the institution's or program's qualifications for accreditation or preaccreditation. At the agency's discretion, third-party comment may be received either in writing or at a public hearing, or both.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that—

- The agency has, and follows, the written policies and procedures in place that direct it to provide public notice, and the opportunity for third party comments, regarding institutions/programs it has scheduled for review.
- The agency's policies include procedures for notifying the public and its relevant internal and external constituencies of the opportunity for comment, and procedures for receiving and processing third-party comments that are clear, comprehensive, and readily accessible to interested persons/groups.
- In instances that the agency delegates the dissemination of the third party notice, that the agency has effective mechanisms in place to ensure the dissemination is documented , and that all input is received by the agency.
- The agency allows sufficient time for the third-party comment process.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- List of internal and external constituencies
- Sample letters to each of the constituencies.
- Website postings or notices of review.
- Correspondence from constituencies responding to the request for public comments.

§602.23(c) The accrediting agency must—

(1) Review in a timely, fair, and equitable manner any complaint it receives against an accredited institution or program that is related to the agency's standards or procedures. *The agency may not complete its review and make a decision regarding a complaint unless, in accordance with published procedures, it ensures that the institution or program has sufficient opportunity to provide a response to the complaint;*

(2) Take follow-up action, as necessary, including enforcement action, if necessary, based on results of its review; and

(3) Review in a timely, fair and equitable manner, and apply unbiased judgment to, any complaints against itself and take follow-up action, as appropriate, based on the results of its review.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that—

- The agency has written policies and procedures for receiving and processing complaints (including anonymous complaints) against its accredited institutions/programs, and itself, and demonstrates that it follows those policies.
- The agency's policies provide institution/program sufficient opportunity to respond to the complaint, prior to the agency making a final determination regarding disposition of the complaint.
- The agency's policies provide for the analysis and resolution of complaints related to the agency's standards, policies and procedures, and explain the procedure by which, if appropriate, a complaint can result in a review of an institution's/program's accreditation or preaccreditation status.
- The agency's policies include the address to send the complaint, and identify the relevant agency parties that receive the complaint.
- To ensure a timely response, the agency's policies include the reasonable timeframes for each step of processing and answering the complaint.
- The agency's complaint policies do not prevent the agency from considering complaints against an institution/program when that institution/program is involved in litigation or other actions by a third party.
- The agency's policies preclude participation by agency personnel (against whom a complaint is lodged) in the agency's final decision-making regarding the complaint.
- The agency's complaint policies include the process for responding to the complaint and notifying the complainant and the institution/program of the results of its review. (Except, of course, in cases where the complaint is submitted anonymously.)

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copies of agency complaint policies and procedures
- Sample complaint(s), if any, and the written notifications to the institution and complainant throughout the process, including its resolution.

§602.23(d) If an institution or program elects to make a public disclosure of its accreditation or preaccreditation status, the agency must ensure that the institution or program discloses that status accurately, including the specific academic or instructional programs covered by that status and the name, address, and telephone number of the agency.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that –

- The agency has written policies and procedures in place regarding the public disclosure by its accredited institutions/programs of their accreditation status.

- The agency's policies direct the institutions/programs (that elect to disclose their status) to accurately disclose their accreditation status, together with the specific programs covered by that status and to include the accrediting agency's name, address and telephone number.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copies of agency policies on public disclosure
- Sample institution/program disclosure(s).

§602.23(e) The accrediting agency must provide for the public correction of incorrect or misleading information an accredited or preaccredited institution or program releases about --

- (1) The accreditation or preaccreditation status of the institution or program;**
- (2) The contents of reports of on-site reviews; and**
- (3) The agency's accrediting or preaccrediting actions with respect to the institution or program.**

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate –

- The agency has enforceable written policies and procedures in place that require or direct its accredited institutions/programs, or both, as appropriate, to publicly correct misleading and incorrect accrediting information released by an institution/program about any item listed in this section.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Excerpt(s) from relevant site visit team guidelines
- Sample letter(s), if any, to an institution/program concerning the correction of disclosed information.

NOTE: §602.23(f) is an acknowledgement of an accrediting agency's authority to establish additional operating policies it deems appropriate, to include unannounced visits. No agency response to this criterion is necessary.

All components of §602.24 apply only to agencies whose accreditation can enable an institution to be eligible to seek participation in a Title IV, HEA program.

§602.24 Additional procedures certain institutional accreditors must have.

If the agency is an institutional accrediting agency and its accreditation or preaccreditation enables those institutions to obtain eligibility to participate in Title IV, HEA programs, the agency must demonstrate that it has established and uses all of the following procedures:

(a) Branch campus.

(1) The agency must require the institution to notify the agency if it plans to establish a branch campus and to submit a business plan for the branch campus that describes--

(i) The educational program to be offered at the branch campus;

(ii) The projected revenues and expenditures and cash flow at the branch campus; and

(iii) The operation, management, and physical resources at the branch campus.

(2) The agency may extend accreditation to the branch campus only after it evaluates the business plan and takes whatever other actions it deems necessary to determine that the branch campus has sufficient educational, financial, operational, management, and physical resources to meet the agency's standards.

(3) The agency must undertake a site visit to the branch campus as soon as practicable, but no later than six months after the establishment of that campus.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency's written policies and procedures outlining the requirements by which an accredited institution seeks and obtains approval of its plans to establish a branch campus (defined by §600.2) that includes submission of a business plan that describes the educational program(s) the institution plans to offer; a budget projecting the revenues and expenditures as well as the expected cash flow at the site; and a description of the operation, management, and physical resources to operate at the new site.
- The branch campus approval review process the agency adheres to in determining that the branch campus has sufficient educational, financial, operational, management, and physical resources to meet the agency's standards.
- Agency protocol for site visits conducted within six months of establishment of the campus.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample application(s) for a new branch submitted by an institution that includes all of the required factors, including agency approval/disapproval letter(s), if any.
- Copies of policies, procedures, protocols for agency review and site visit of branch campuses.
- Title IV gatekeepers whose accredited institutions do not have branch campuses, please provide a statement to that effect.

§602.24(b) Change in ownership.

The agency must undertake a site visit to an institution that has undergone a change of ownership that resulted in a change of control as soon as practicable, but no later than six months after the change of ownership.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that –

- The agency's policy directs the institution and/or new owners to notify the agency of a change of ownership within a stated timeframe (typically 6 months) before the transaction, and to submit all required documentation outlining the type of ownership, e.g., public, private, limited partnership, etc.
- The agency's policy and protocol regarding a change of ownership that results in a change of control are clear and comprehensive in outlining the agency's review and approval process to include the conduct of a site visit within six months after the change of ownership occurs.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample notification from an institution that a change of ownership is planned.
- Samples of signed management agreements, option agreements or contractual agreements that represent the kind of documentation the agency reviews in a change of ownership.
- Evidence that the agency has implemented its policy and procedures.

§602.24(c) Teach-out plans and agreements.

(1) The agency must require an institution it accredits or preaccredits to submit a teach-out plan to the agency for approval upon the occurrence of any of the following events:

(i) The Secretary notifies the agency that the Secretary has initiated an emergency action against an institution, in accordance with section 487(c)(1)(G) of the HEA, or an action to limit, suspend, or terminate an institution participating in any title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA, and that a teach-out plan is required.

(ii) The agency acts to withdraw, terminate, or suspend the accreditation or preaccreditation of the institution.

(iii) The institution notifies the agency that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program.

(iv) A State licensing or authorizing agency notifies the agency that an institution's license or legal authorization to provide an educational program has been or will be revoked.

(2) The agency must evaluate the teach-out plan to ensure it provides for the equitable treatment of students under criteria established by the agency, specifies additional charges, if any, and provides for notification to the students of any additional charges.

(3) If the agency approves a teach-out plan that includes a program that is accredited by another recognized accrediting agency, it must notify that accrediting agency of its approval.

(4) The agency may require an institution it accredits or preaccredits to enter into a teach-out agreement as part of its teach-out plan.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency's policies directing its institutions to submit a teach-out plan when any of the four circumstances stipulated in the regulations occurs and what action /documentation will the agency take/retain in the event that an institution does not cooperate with an agency's requirement that it submit a teach-out plan.
- The agency's procedures for review and approval of those teach-out plans.
- The agency's criteria and review considerations in assessing the information to be included in a teach-out plan, which at a minimum identifies the agency's criteria for the equitable

treatment of students, and requires specification of any additional charges and notices to students about the charges.

- The agency's procedures for timely notifying recognized agencies that accredit programs offered by the institution of the agency's approval of a teach-out plan.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Copies of policies and agency procedures pertaining to submission, review, and approval of teach-out plans.
- Sample teach-out plan the agency reviewed, if any, and the agency's notice to the institution of its approval/disapproval of the plan. If a sample is unavailable, please provide a written statement affirming that the agency has not had cause to review any teach-out plans.

§602.24(c)(5) The agency must require an institution it accredits or preaccredits that enters into a teach-out agreement, *either on its own or at the request of the agency*, with another institution to submit that teach-out agreement to the agency for approval. The agency may approve the teach-out agreement only if the agreement is between institutions that are accredited or preaccredited by a nationally recognized accrediting agency, is consistent with applicable standards and regulations, and provides for the equitable treatment of students by ensuring that--

(i) The teach-out institution has the necessary experience, resources, and support services to

(A) Provide an educational program that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the institution *that is ceasing operations either entirely or at one of its locations*; and

(B) *Remain stable, carry out its mission, and meet all obligations to existing students*; and

(ii) The teach-out institution demonstrates that it can provide students access to the program and services without requiring them to move or travel substantial distances *and that it will provide students with information about additional charges, if any.*

(d) Closed Institution. If an institution the agency accredits or preaccredits closes *without a teach-out plan or agreement*, the agency must work with the Department and the appropriate State agency, to the extent feasible, to *assist students in finding* reasonable opportunities to complete their education without additional charge.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that –

- The agency has a policy directing institutions that plan to enter into a teach-out agreement with another institution to submit that agreement to the agency for approval.
- The agency's procedures for review and approval of the teach-out agreements bases agency approval on agency assessment of, at a minimum, the following factors:
 - that the teach-out institution is able to provide the necessary experience, resources and support services;
 - that the educational program is of acceptable quality and reasonably similar in content, structure and scheduling to that provided by the closing institution or location;
 - that the teach-out occurs between institutions that are accredited or preaccredited by a nationally recognized accrediting agency, is consistent with applicable standards and regulations, and meets obligations to existing students;
 - that the teach-out does not require students to move or travel substantial distances to have access to the program and services; and
 - that the institution providing the teach-out notifies students in a timely manner of additional charges, if any.
- The agency's written policy affirms that the agency will work with the Department and the appropriate State agency, to the extent feasible, to assist students at an institution that has closed without a teach-out plan or agreement in finding reasonable opportunities to complete their education without additional charges.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Copies of policies and agency procedures pertaining to submission, review, and approval of teach-out agreements.
- A sample teach-out agreement that the agency approved with documentation implementing a teach-out, if any. If a sample is unavailable, please provide a written statement affirming that the agency has not had occasion to approve a teach-out agreement.

§602.24(e) Transfer of credit policies. The accrediting agency must confirm, as part of its review for initial accreditation or preaccreditation, or renewal of accreditation, that the institution has transfer of credit policies that --

(1) Are publicly disclosed in accordance with §668.43(a)(11); and

(2) Include a statement of the criteria established by the institution regarding the transfer of credit earned at another institution of higher education.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated aspects including –

- The agency confirms during its institutional reviews that institutions have transfer of credit policies that are publicly disclosed and the public notice includes --
 - a statement of the current transfer of credit policies,

- the established criteria used regarding the transfer of credit earned at another institution, and
- a list of the institutions with which the institution has established articulation agreements.
- The agency demonstrates how the requirement is incorporated into the review process,

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Site visit documentation
- Copies of policies and procedures
- Training materials

§602.24 (f) *Credit hour policies.* The accrediting agency, as part of its review of an institution for initial accreditation or preaccreditation or renewal of accreditation, must conduct an effective review and evaluation of the reliability and accuracy of the institution's assignment of credit hours.

(1) *The accrediting agency meets this requirement if--*

(i) *It reviews the institution's--*

(A) *Policies and procedures for determining the credit hours, as defined in 34 CFR 600.2, that the institution awards for courses and programs; and*

(B) *The application of the institution's policies and procedures to its programs and coursework; and*

(ii) *Makes a reasonable determination of whether the institution's assignment of credit hours conforms to commonly accepted practice in higher education.*

(2) *In reviewing and evaluating an institution's policies and procedures for determining credit hour assignments, an accrediting agency may use sampling or other methods in evaluation, sufficient to comply with paragraph (f)(1)(i)(B) of this section.*

General Guidance on §602.24(f)

Accrediting agencies whose accreditation can enable an institution to be eligible to seek participation in title IV, HEA programs are expected to assess institutions to determine if they have made credit hour determinations for title IV, HEA program purposes that meet at least the minimum standards in the definition of a credit hour in §600.2 (see boxed text below), in light of commonly accepted practice in higher education. The regulations do not preclude an institution using other metrics for determining credit hours or other measures of student work for academic and other non-Federal purposes.

Institutions are responsible and accountable for demonstrating that each course has the appropriate amount of student work for students to achieve the level of competency (i.e., learning outcomes)

defined by institutionally established course objectives. Institutions are accountable for assigning an amount of title IV credit hours for each course that corresponds to the quantity of work reasonably expected to be required in order to achieve those learning outcomes, and for documenting student achievement of those objectives. Institutions must assign credit hours in a way that complies with measures in §600.2 and that conforms with commonly-accepted practice in higher education.

Accrediting agencies are not expected to review every course and related documentation of learning outcomes; rather, the agency's review is of the policies and procedures the institution uses to assign credit hours, with the application verified by a sampling of the institution's degree and nondegree programs to encompass a variety of academic activities, disciplines, and delivery modes. During the 2011-2012 review cycle, the Department will use the experience of reviewing agency submissions to develop and disseminate models through updates to this guidance that agencies could rely on to meet this requirement. However, the use of such models would not be mandated and, instead, the Department will work with agencies to adopt approaches that best fit the institutions that the agency accredits.

Accrediting agencies are not required to mandate specific policies for institutions with regard to assigning credit hours to programs and coursework. Since the regulations establish a minimum standard, and institutions may choose to include more work for their credit hours than the minimum amount, credit hours at one institution will not necessarily equate to credit hours at another institution for a similar program.

§600.2 Definitions

Credit hour: Except as provided in 34 CFR 668.8(k) and (l), a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than—

- (1) One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or
- (2) At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

A credit hour for Federal purposes is an institutionally established equivalency that reasonably approximates some minimum amount of student work reflective of the amount of work expected in a Carnegie unit: key phrases being “institutionally established,” “equivalency,” “reasonably approximate,” and “minimum amount.” Further, the definition does not dictate particular amounts of classroom time versus out-of-class student work, and an institution may use alternative delivery methods, measurements of student work, or academic calendars to determine intended learning outcomes and verify evidence of student achievement. To the extent an institution believes that complying with the Federal definition of a credit hour would not be appropriate for academic and other institutional needs, it may adopt a separate measure for those purposes.

The credit hour definition in §600.2 does not apply directly to nondegree, undergraduate programs that are subject to the title IV clock-to-credit-hour conversion requirements as described in 34 CFR 668.8(k) and (l). However, there is a linkage in that, under §668.8(l)(2), if a nondegree program is subject to the conversion requirements, the institution may convert by assigning a number of clock hours to each credit hour that is less than the basic minimum required number of clock hours of instruction otherwise required, e.g., at least 37.5 clock hours per semester hour, if the accrediting agency's analysis of the institution under §602.24(f) identifies no deficiencies in the institution's assignment of credit hours and if the institution complies with certain additional requirements in §668.8(l)(2) when there is student work outside of class. In any case, the number of clock hours must be at least 30 clock hours per semester or trimester hour or 20 clock hours per quarter credit hour. In determining the appropriate conversion rates under §668.8(l)(2), the institution identifies the amount of work outside of class for various educational activities in a course or program.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated that—

- It has written policy and procedures that address the review and evaluation of the institution's assignment of credit hours as defined for Federal program purposes.
- The agency's procedures include criteria for assessing an institution's assignment of credit hours, for adequacy of the institutionally-identified policies and procedures, and for evidence of an accurate, reliable application provided by the institution.
- The agency makes a reasonable determination whether the institution's policies and procedures result in the establishment of credit hours for title IV, HEA program purposes that meet at least the minimum standards in the definition in 34 CFR 600.2 and that conform to commonly accepted practice in higher education.
- The agency's review processes encompass a varied sample of the institution's degree and nondegree programs in terms of academic discipline, level, delivery modes, and types of academic activities. It is important to note that an agency's review does not need to look at all courses.
- If its procedures include sampling to determine credit hour assignments, the agency provides guidance to site review teams on selecting a sample that adequately encompasses a variety of disciplines, degree levels, teaching/learning formats, and delivery modes.
- In reviewing academic activities other than classroom or direct faculty instruction accompanied by out-of-class work, the agency determines whether an institution's processes and procedures result in the establishment of reasonable equivalencies for the amount of academic work described in paragraph (1) of the credit hour definition within the framework of acceptable institutional practices at comparable institutions of higher education for similar programs, including undergraduate programs subject to the clock-to-credit-hour conversion requirements under §668.8(l).

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate—

- The agency's written policy, procedures, and criteria for reviewing institutions' assignment of credit hours to programs and coursework for title IV purposes.
- Sample self-study(ies) demonstrating the institution's policies and procedures for assigning credit hours to programs and coursework.

- Excerpts from site team reports.
- Training materials.

(3) The accrediting agency must take such actions that it deems appropriate to address any deficiencies that it identifies at an institution as part of its reviews and evaluations under paragraph (f)(1)(i) and (ii) of this section, as it does in relation to other deficiencies it may identify, subject to the requirements of this part.

(4) If, following the institutional review process under this paragraph (f), the agency finds systemic noncompliance with the agency's policies or significant noncompliance regarding one or more programs at the institution, the agency must promptly notify the Secretary.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated the following —

- The types of actions it takes when it concludes that an institution's policies and procedures for determining credit hour assignments are deficient.
- The written policy that the agency has, and implements, directing it to promptly notify the Secretary when the agency finds systemic noncompliance with the agency's policies regarding credit hour assignments or significant noncompliance regarding one or more programs at the institution.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate—

- Agency letter(s) specifying deficiencies identified in an institution's processes and procedures and agency actions.
- If appropriate, correspondence to the Secretary containing information about an institution's systemic or significant noncompliance with the agency's policies.

§602.25 Due process.

The agency must demonstrate that the procedures it uses throughout the accrediting process satisfy due process. The agency meets this requirement if the agency does the following:

- (a) Provides adequate written specification of its requirements, including clear standards, for an institution or program to be accredited or preaccredited.*
- (b) Uses procedures that afford an institution or program a reasonable period of time to comply with the agency's requests for information and documents.**
- (c) Provides written specification of any deficiencies identified at the institution or program examined.*
- (d) Provides sufficient opportunity for a written response by an institution or program, regarding any deficiencies identified by the agency, to be considered by the agency within a timeframe determined by the agency, and before any adverse action is taken.*
- (e) Notifies the institution or program in writing of any adverse accrediting action or an action to place the institution or program on probation or show cause. The notice describes the basis for the action.**

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as whether -

- The agency has written policies governing due process that give an institution/program a clear and detailed explanation and notification of the rights, obligations and duties of all parties in the proceedings.
- The agency's standards are clear enough to provide institutions/programs notice of what is required of them.
- The agency's written procedures give an institution/program a reasonable period of time to comply with the agency's requests for information and documentation.
- The agency's written procedures include providing an institution/program written specification of any identified deficiencies.
- The agency provides sufficient time for a written response by an institution/program regarding any deficiencies identified before an adverse action is taken.
- The agency demonstrates that it notifies its accredited or preaccredited institutions/programs in writing of any adverse accrediting action or an action to place the entity on probation or show cause.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Agency letter(s) specifying deficiencies identified at an institution/program.

- Copies of standards, policies and procedures
- Site visit reports

§602.25(f) Provides an opportunity, upon written request of an institution or program to appeal any adverse action prior to the action becoming final.

(1) The appeal must take place at a hearing before an appeals panel that--

(i) May not include current members of the agency's decision-making body that took the initial adverse action;

(ii) Is subject to a conflict of interest policy;

(iii) Does not serve only an advisory or procedural role, and has and uses the authority to make the following decisions: to affirm, amend, or reverse adverse actions of the original decision-making body; and

(iv) Affirms, amends, reverses, or remands the adverse action. A decision to affirm, amend, or reverse the adverse action is implemented by the appeals panel or by the original decision-making body, at the agency's option. In a decision to remand the adverse action to the original decision-making body for further consideration, the appeals panel must identify specific issues that the original decision-making body must address. In a decision that is implemented by or remanded to the original decision-making body, that body must act in a manner consistent with the appeals panel's decisions or instructions.

(2) The agency must recognize the right of the institution or program to employ counsel to represent the institution or program during its appeal, including to make any presentation that the agency permits the institution or program to make on its own during the appeal.

(g) The agency notifies the institution or program in writing of the result of its appeal and the basis for that result.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects such as –

- The agency's written notice of adverse action describes the basis for the action and informs the institution/program of its right to appeal.
- The agency permits the institution/program the opportunity to appeal an adverse action decision and the right to be represented by counsel during an appeal of that decision, including making any presentation that the agency permits the entity to make on its own during the appeal.
- The agency notifies the institution/program in writing of the result of its appeal and the basis for that result.
- Appeals Panel Provisions:

- The appeal takes place before an appeals panel that does not include current members of the decision-making body that decided the initial adverse action.
- Members of the appeals panel are subject to a conflict of interest policy.
- The agency's procedures provide for an appeals panel to affirm, amend, reverse or remand the adverse action.
- The agency's procedures stipulate which body is responsible for implementing a decision to affirm, amend or reverse an adverse action, and if it is not the appeals panel, the procedures provide that the body implementing the decision act in a manner consistent with the decision made by the appeals panel.
- The agency's procedures direct the appeals panel to identify specific issues that the original decision-making body needs to address when a decision is remanded back to that body for further consideration.
- The appeals panel meets the requirements for recognition, such as having a public member and having academic and administrative personnel if it accredits institutions, and educators and practitioners, if it accredits programs or single-purpose institutions, and be expressly recognized by the Department.
- If the agency does not have a standing appeals panel, a description of the process by which a panel would be constituted which addresses the requirements, as applicable, for public members, educators, and practitioners

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Agency letter(s) specifying deficiencies identified at an institution/program.
- Correspondence notifying the institution/program of the adverse decision and right to appeal.
- Agency letter(s) and supporting correspondence of the decision on the appeal, etc.
- Correspondence demonstrating that the agency has implemented its due process policies and procedures for the adverse action and appeal of an unfavorable decision.
- Sample decisions made by the appeals panel demonstrating that the appeals panel makes all types of decisions.
- Communications from the appeals panel to the original decision-making body when the appeals panel decides to remand the adverse action for further consideration.
- Any decision implemented by the original decision-making body demonstrating that that body acted in a manner consistent with the appeals panel's decisions or instructions.
- Applicable conflict of interest policies and evidence of their implementation.
- List of appeals panel members identifying public members, and if applicable, the educators, practitioners, etc.
- If no appeals have been conducted, please provide a written statement attesting to that fact.

§602.25(h)(1) *The agency must provide for a process, in accordance with written procedures, through which an institution or program may, before the agency reaches a final adverse action decision, seek review of new financial information if all of the following conditions are met:*

(i) The financial information was unavailable to the institution or program until after the decision subject to appeal was made.

(ii) The financial information is significant and bears materially on the financial deficiencies identified by the agency. The criteria of significance and materiality are determined by the agency.

(iii) The only remaining deficiency cited by the agency in support of a final adverse action decision is the institution's or program's failure to meet an agency standard pertaining to finances.

(2) An institution or program may seek the review of new financial information described in paragraph (h)(1) of this section only once and any determination by the agency made with respect to that review does not provide a basis for an appeal.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, aspects of its due process requirements such as –

- The agency's written procedures describing its process to allow an institution or program to seek review of new financial information prior to the agency reaching a final adverse action decision.
- The agency's written procedures allowing an institution that was initially cited for multiple issues, and that has resolved all of the non-financial issues, to seek review of new financial information.
- Whether the agency's procedures provide for a review within or outside of the appeals process.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Copies of the agency's policies and procedures regarding due process
- If available, evidence that the agency has implemented its procedures, including correspondence notifying the institution/program of the right to seek review of new financial information; if not available, please provide a statement that none of the agency's institutions/programs have sought review under this provision.

§602.26 Notification of accrediting decisions.

The agency must demonstrate that it has established and follows written procedures requiring it to provide written notice of its accrediting decisions to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public. The agency meets this requirement if the agency, following its written procedures --

(a) Provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public no later than 30 days after it makes the decision:

(1) A decision to award initial accreditation or preaccreditation to an institution or program.

(2) A decision to renew an institution's or program's accreditation or preaccreditation.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that--

- The agency has, and implements, a written policy directing it to give written notice to the four listed entities of a decision to award **initial** accreditation or preaccreditation no later than 30 days after the decision.
- The agency has, and implements, a written policy directing it to give written notice of a decision to **renew** accreditation or preaccreditation to the four listed entities no later than 30 days after the decision.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate --

- Sample correspondence and/or website information, as appropriate, demonstrating that the agency routinely notifies the listed entities listed of the cited accrediting decisions.
- Any agency seeking **initial recognition**, provides a declaration of intent to follow its published policies by notifying the listed entities, if it is granted recognition

§602.26(b) Provides written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies the institution or program of the decision, but no later than 30 days after it reaches the decision:

(1) A final decision to place an institution or program on probation or an equivalent status.

(2) A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation or preaccreditation of an institution or program.

(3) A final decision to take any other adverse action, as defined by the agency, not listed in paragraph (b)(2) of this section.

(c) Provides written notice to the public of the decisions listed in paragraphs (b)(1), (b)(2), and (b)(3) of this section within 24 hours of its notice to the institution or program;

(d) For any decision listed in paragraph (b)(2) of this section, makes available to the Secretary, the appropriate State licensing or authorizing agency, and the public, no later than 60 days after the decision, a brief statement summarizing the reasons for the agency's decision and the *official* comments, if any, that the affected institution or program may wish to make with regard to that decision, or *evidence that the affected institution has been offered the opportunity to provide official comment.*

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, whether –

- The agency has written policies directing it to provide written notice to the specified entities of a final decision to place an institution/program on probation (or equivalent status), or to deny, withdraw, suspend, revoke or terminate accreditation/preaccreditation, or to take any other adverse action, as defined by the agency, at the same time it notifies the institution/program of the final decision but no later than 30 days after the final decision.
- The agency provides written notice to the public of the specified decisions within 24 hours of its notice to the institution/program, including how this notice will be provided (and noting any constituencies to receive the notice).
- The written policies state that it will make available to the four specified entities within 60 days, a brief statement summarizing the reasons for the agency's decision and the official comments, if any, that the affected institution/program may wish to make with regard to that decision, or evidence that the institution/program has been offered the opportunity to provide official comments.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample correspondence demonstrating that the agency routinely notifies the listed entities listed of the cited accrediting decisions.

- Any agency seeking **initial recognition**, provides a declaration of intent to follow its published policies by notifying the listed entities of its decisions.

§602.26(e) Notifies the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and, upon request, the public if an accredited or preaccredited institution or program --

(1) Decides to withdraw voluntarily from accreditation or preaccreditation, within 30 days of receiving notification from the institution or program that it is withdrawing voluntarily from accreditation or preaccreditation; or

(2) Lets its accreditation or preaccreditation lapse, within 30 days of the date on which accreditation or preaccreditation lapses.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate –

- The agency has, and implements, a written policy directing it to notify the public, as well as the Secretary, the appropriate State licensing or authorizing agency, and the appropriate accrediting agencies of information related to an institution's/program's lapsed or voluntarily withdrawn status.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample correspondence and/or website information, as appropriate, demonstrating that the agency routinely notifies the listed entities regarding any lapsed or voluntarily withdrawn status.
- Any agency seeking **initial recognition**, provides a declaration of intent to follow its published policies by notifying the listed entities, if it is granted recognition

§602.27 Other information an agency must provide the Department.**(a) The agency must submit to the Department --**

- (1) A copy of any annual report it prepares;**
- (2) A copy, updated annually, of its directory of accredited and preaccredited institutions and programs;**
- (3) A summary of the agency's major accrediting activities during the previous year (an annual data summary), if requested by the Secretary to carry out the Secretary's responsibilities related to this part;**
- (4) Any proposed change in the agency's policies, procedures, or accreditation or preaccreditation standards that might alter its --**
 - (i) Scope of recognition, *except as provided in paragraph (a)(5) of this section; or***
 - (ii) Compliance with the criteria for recognition.**
- (5) *Notification that the agency has expanded its scope of recognition to include distance education or correspondence education as provided in section 496(a)(4)(B)(i)(1) of the HEA. Such an expansion of scope is effective on the date the Department receives the notification.***
- (6) The name of any institution or program it accredits that the agency has reason to believe is failing to meet its Title IV, HEA program responsibilities or is engaged in fraud or abuse, along with the agency's reasons for concern about the institution or program; and**
- (7) If the Secretary requests, information that may bear upon an accredited or preaccredited institution's compliance with its Title IV, HEA program responsibilities, including the eligibility of the institution or program to participate in Title IV, HEA programs.**

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate that—

- The agency has, and implements, written policies and procedures directing the agency to regularly and timely provide the Department with the specified information, as well as the additional specified information if so requested, as appropriate.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample correspondence submitted to the Secretary providing notification regarding any proposed changes in agency standards, policies and procedures.
- If applicable, correspondence notifying the Secretary of the agency's concerns regarding an institution's/program's compliance with its Title IV requirements.
- A cover letter transmitting a directory, annual report, etc., as appropriate.
- Notification that the agency has expanded its scope of recognition to include distance education or correspondence education

§602.27(b) If an agency has a policy regarding notification to an institution or program of contact with the Department in accordance with paragraph (a)(6) or (a)(7) of this section, it must provide for a case by case review of the circumstances surrounding the contact, and the need for the confidentiality of that contact. Upon a specific request by the Department, the agency must consider that contact confidential.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate aspects such as –

- Whether the agency has a policy of notifying the institution of its notifications to the department regarding title IV administration and/or suspected fraud and abuse and if so, that the policy needs to be in writing, so that it can be reviewed by the Department.
- Whether the agency's policy specifically provides for an agency review of Departmental contacts on a case-by-case basis, in order to enable the agency to properly assess whether the confidentiality of the contact needs to be maintained.
- Whether the policy specifies that if the Department specifically requests that a contact it has had with the agency remain confidential, then the agency is required to consider that contact confidential.

Typical Documentation:

In addressing this area, suggested documentation may include the following types of items, as appropriate –

- Agency policy and procedures for conducting a case-by-case review with evidence of implementation (perhaps including minutes), if appropriate.

§602.28 Regard for decisions of States and other accrediting agencies.

(a) If the agency is an institutional accrediting agency, it may not accredit or preaccredit institutions that lack legal authorization under applicable State law to provide a program of education beyond the secondary level.

(b) Except as provided in paragraph (c) of this section, the agency may not grant initial or renewed accreditation or preaccreditation to an institution, or a program offered by an institution, if the agency knows, or has reasonable cause to know, that the institution is the subject of--

(1) A pending or final action brought by a State agency to suspend, revoke, withdraw, or terminate the institution's legal authority to provide postsecondary education in the State;

(2) A decision by a recognized agency to deny accreditation or preaccreditation;

(3) A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or preaccreditation; or

(4) Probation or an equivalent status imposed by a recognized agency.

(c) The agency may grant accreditation or preaccreditation to an institution or program described in paragraph (b) of this section only if it provides to the Secretary, within 30 days of its action, a thorough and reasonable explanation, consistent with its standards, why the action of the other body does not preclude the agency's grant of accreditation or preaccreditation.

(d) If the agency learns that an institution it accredits or preaccredits, or an institution that offers a program it accredits or preaccredits, is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, the agency must promptly review its accreditation or preaccreditation of the institution or program to determine if it should also take adverse action or place the institution or program on probation or show cause.

(e) The agency must, upon request, share with other appropriate recognized accrediting agencies and recognized State approval agencies information about the accreditation or preaccreditation status of an institution or program and any adverse actions it has taken against an accredited or preaccredited institution or program.

Review Elements:

In assessing this area, Department staff looks to see if the agency discussed and demonstrated, as appropriate, that –

- The agency's written policy does not allow the agency to accredit or preaccredit institutions that lack legal authorization under applicable State law to provide a program of education beyond the secondary level.
- The agency's written policy does not, as a general rule, allow it to grant accreditation/preaccreditation under circumstances specified under §602.28(b). However, if the agency does grant accreditation/preaccreditation notwithstanding the specified circumstances, then the written policy directs the agency to provide a timely and thorough written explanation to the Secretary regarding why the action was warranted under agency standards.
- The agency's written policy directs it to promptly review its accreditation or preaccreditation of an institution/program when it learns of a relevant adverse action by another recognized agency.
- The agency's policy directs it to share information regarding the status of, and any adverse actions it takes against, an accredited institution/program.

Typical Documentation:

In addressing this area, agencies have provided the following types of items, as appropriate –

- Sample copies of decisions, etc. demonstrating that the agency has applied its written policies and complied with any of the requirements of this section, as appropriate to the circumstances.

Appendix A: Required Responses (X) by Type of Agency for Applicable Sections of 34 CFR 602

AGENCY ACCREDITS- (*If agency accredits programs AND institutions for T4 purposes please follow pink column.)	INSTITUTIONS FOR T4 PURPOSES	INSTITUTIONS AND PROGRAMS (NON-T4 PURPOSE)	PROGRAMS ONLY
§§602.10-602.13 - Basic Eligibility Req.	X	X	X
§602.14(a) - Purpose and Organization	X	X	X
§602.14(b)	X	N/A	N/A
§602.14(c)	X	N/A	N/A
§602.14(d) and (e)	X	N/A	N/A
§§602.15(a)(1) &(a)(2)- Admin/Fiscal	X	X	X
§602.15(a)(3)	X	X	N/A
§602.15(a)(4)	N/A	X	X
§§602.15(a)(5) and (a)(6)	X	X	X
§602.15(b)	X	X	X
§§602.16(a)(1)(i-vii) - Standards	X	X	X
§602.16(a)(1)(viii)	X	N/A	N/A
§602.16(a)(1)(ix)	X	X	X
§602.16(a)(1)(x)	X	N/A	N/A
§602.16(a)(2) – Preaccreditation, if appropriate	X	X	X
§602.16(b) – Information only	-	-	-
§602.16(c) - Distance Education, if appropriate	X	X	X
§602.16(d)(e)(f) – Information only	-	-	-
§§602.17(a-f) - Application of Standards	X	X	X
§§602.17(g)(1)&(g)(2)- Distance education, if appropriate	X	X	N/A
§602.18 - Ensuring Consistency	X	X	X
§§602.19(a-c) - Monitoring & Reevaluation	X	X	X
§602.19(d)	X	X	N/A
§602.19(e) - Notification adding Distance Education, if appropriate	X	X	N/A
§602.20 - Enforcement of Standards	X	X	X
§602.21 - Review of Standards	X	X	X
§602.22(a)(1) - Substantive Change	X	X- Institutions only	N/A
§§602.22(a)(2)(i-vi)	X	X- Institutions only	N/A
§602.22(a)(2)(vii)	X	N/A	N/A
§602.22(a)(2)(viii)(A)	X	N/A	N/A
§§602.22(a)(2)(viii)(B-E)	X	N/A	N/A
§602.22(a)(2)(ix)	X	X- Institutions only	N/A
§602.22(a)(2)(x)	X	X- Institutions only	N/A
§602.22(a)(3)	X	X- Institutions only	N/A
§602.22(b)	X	X- Institutions only	N/A
§602.22(c)	X	N/A	N/A
§602.22(d)	X	N/A	N/A
§602.23 - Operating Procedures	X	X	X
§602.24 - Additional Procedures	X	N/A	N/A
§602.25 - Due Process	X	X	X
§602.26 - Notification of Accrediting Decisions	X	X	X
§§602.27(a)(1-5) - Other Information	X	X	X
§§602.27(a)(6) and (a)(7) and (b)	X	N/A	N/A
§602.28(a) – Legal Authorization	X	X- Institutions only	N/A
§§602.28(b-e) - Regard for Decisions of Others	X	X	X