



# Handbook of Accreditation for Public and Non-Public Institutions

**2022 Edition**



# SECTION I

## The Role and Value of Accreditation

**A**ccreditation is a status granted to an educational institution or program that has been found to meet or exceed stated criteria of educational quality and student achievement. Accreditation emerged in the United States in the late 1800s as a voluntary peer review process that was initiated by educational institutions to ensure quality in particular types of institutions (e.g., colleges, high schools, and subsequently other types of institutions). In contrast, accreditation is generally unknown in other countries of the world because they rely on government supervision and control of educational institutions. The record of accomplishment and outstanding success in the education of Americans can be traced in large part to the reluctance of the United States to impose governmental restrictions on institutions of postsecondary education, and to the success of the voluntary system of accreditation in promoting quality without inhibiting innovation. In the United States, accreditation is voluntarily sought by institutions and programs and is generally conferred by non-governmental agencies\*.

Accreditation has two fundamental purposes: (1) to ensure the quality of the institution or program, and (2) to assist in the improvement of the institution or program. Accreditation applies to institutions or programs, and is distinguished from certification and licensure which apply to individuals.

Bodies which conduct programmatic or specialized accreditation are national in scope and focus attention on a program within a postsecondary institution preparing students for a profession or occupation.

Bodies which conduct institutional accreditation are national or regional in scope, and consider the characteristics of whole institutions. For this reason, an institutional accrediting body gives attention not only to the educational offerings of the institutions it accredits, but to such other institutional characteristics as student services, financial status, administrative structure, facilities, and equipment. The Council on Occupational Education is recognized as a national institutional accrediting agency.

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\* The sole exception to accreditation for degree-granting higher education institutions being conferred by “non-governmental agencies” is the New York State Board of Regents, which is the oldest accrediting body in the United States. In addition, there are several state agencies that are recognized by the U.S. Secretary of Education as “state approval agencies” which confer “accreditation-like” status upon certain public, non-degree, postsecondary, career and technical education institutions.

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# SECTION II

## Development of COE Accreditation

**A** fundamental tenet of a democratic society is that all individuals should have an opportunity to receive an education commensurate with their personal abilities and ambitions. For the vast majority of Americans, this means that the educational system must provide for (1) the acquisition of competencies that will lead to gainful employment in various occupational fields and (2) the continuing education necessary as technological advances place new demands on workers.

### **A. History**

The Council on Occupational Education (hereinafter referred to as the Council or COE) came into existence initially in 1971 as the Commission on Occupational Education Institutions (COEI) of the Southern Association of Colleges and Schools (SACS), a regional accrediting association that serves institutions in an eleven-state region. Operating as a unit of SACS, COEI provided accreditation services to postsecondary occupational education institutions located, with a few special exceptions, in the SACS region.

In preparation for assuming a national scope, the Council was incorporated as a non-profit education organization under laws of the State of Georgia in June 1994. At the end of June 1995, the Council became a fully operational agency when all assets (staff, physical resources, and financial resources) and the membership of COEI were transferred from SACS to the Council. The Commission, composed of 19 members, functions as the governing board and the decision-making body for all accreditation actions of the Council.

Throughout its history, the Council and its predecessor agency have been recognized by the U.S. Secretary of Education as a reliable authority on the quality of education offered by the institutions it accredits. Its current scope of recognition is as a national institutional accrediting agency for the accreditation of non-degree-granting and applied associate degree-granting postsecondary occupational education institutions.

### **B. Core Values**

On November 8, 2008, the delegates at the Council's annual meeting adopted the core values listed below. The core values provide the foundation for the Council's mission, goals, and objectives.

1. Trustworthiness - denotes honesty, integrity, and reliability.
2. Transparency - implies openness, communication, and clear visibility. Describes an accreditation process or status that is not secretive or mystical.
3. Accountability - implies being answerable and liable. Describes accredited institutions' responsibility to students, regulatory agencies, and business and industry.
4. Commitment - requires dedication of institutions, volunteers, Commissioners and staff. Denotes allegiance, loyalty, and obligation.

5. Flexibility - describes the ability to adapt to both internal and external market changes while maintaining core values. Implies resilience and being open to modification and change.
6. Innovation - proposes a blueprint for expectations for the future that encourages perceptive and imaginative experimentation aimed at meeting the needs of constituents. Addresses the expanded learning economy, student preparedness, and cultural understanding.
7. Collaboration - involves stakeholders working together toward a common goal of quality and integrity and making cooperative use of resources and best practices. Accomplished by institutions through networking and communities of practice.
8. Responsiveness - demonstrates an understanding of constituent's needs and a willingness to respond easily or readily.

### **C. Mission, Goals, and Objectives of the Council**

As articulated to its membership, the mission of the Council is "assuring quality and integrity in career and technical education." The following goals represent the significant values and purposes to which the Council is dedicated:

1. To offer public assurance that accredited educational institutions provide quality instruction in career and technical education that facilitates learning by students and meeting the needs of the labor market
2. To provide guidance to institutions for the continuous improvement of their educational offerings and related activities
3. To promote high ethical and educational standards for career and technical education
4. To enhance public understanding of career and technical education providers and of the value of the education and the credentials offered by these providers
5. To ensure that the accreditation process validates the achievement of learning and program objectives

These goals embrace a commitment to integrity and credibility that are intended to result in accreditation by the Council being viewed as a nationally-honored seal of excellence for occupational education institutions. Through its accreditation process, the Council seeks to stimulate the following activities:

1. Validation of job skills
2. Certification of skills for local, state, regional, and national application
3. Portability of skill credentials
4. Placement of graduates in jobs related to preparation received
5. Facilitation of partnerships and consortia through which the United States can continue to compete successfully in the global economy
6. Linkages among employers, policy makers, business and industry, labor, and other parties with vital interests in technical education

The mission and goals of the Council provide the framework from which the objectives of COE as an accrediting agency are derived. The following are these objectives:

1. To foster excellence in the field of career and technical education by establishing standards and guidelines for evaluating institutional effectiveness
2. To encourage institutions to view self-assessment and evaluation as a continuous quality improvement process
3. To provide counsel and assistance to established and developing institutions, disseminating information between and among institutions that will stimulate improvement of educational programs and related activities
4. To ensure that the standards, policies, and procedures developed are enforced and demonstrate recognition of and respect for the stated mission of the institution, **the diversity of institutional missions**, including religious missions, and ensure that the courses or programs of instruction, training, or study offered by the institution, including distance education courses or programs, are of sufficient quality to achieve their stated objective
5. To ensure that the standards, policies, and procedures developed advance quality, creativity, cooperation, and performance
6. To require, as an integral part of the accrediting process, an institutional self-assessment that is analytical and evaluative and an on-site review by a visiting team of peers
7. To ensure that the processes of evaluation, policy-making, decision-making, and public participation accommodate the interests of the constituencies affected by the accrediting agency
8. To publish and otherwise make publicly available the (a) names of candidate and accredited institutions, (b) names and affiliations of members of its policy and decision-making bodies, and (c) names of its principal administrative personnel

#### **D. Council Membership**

Membership in the Council is achieved through a process whereby an institution elects on a voluntary basis to seek affiliation with the Council. The institution seeks initial affiliation with the Council as a candidate for accreditation, which is followed by an extensive self-assessment and, where necessary, self-improvement effort to demonstrate compliance with the Council's Standards and Criteria on educational quality for occupational education institutions. Membership in the Council is achieved and maintained by institutions through the granting of accreditation or reaffirmation of accreditation by the Commission of the Council.

Accreditation is a status of recognition that is granted to an institution which complies with the eligibility requirements, standards, procedures, and obligations adopted by the member institutions of the Council. Accreditation does not certify that every facet of an institution is of equal quality, but it does indicate that no part of the institution is so weak that the educational effectiveness of the institution as a whole and its services to students will be undermined.

## **E. Innovation**

The Commission welcomes and encourages perceptive and imaginative experimentation which aims at increasing the effectiveness of the institution. The Commission is cognizant that special requirements may pertain to some institutions; but these requirements should not be permitted to inhibit new approaches and emphases in educational programs. The Commission insists, however, that such innovative approaches be consistent with the institution's mission and goals, as well as with the mission, goals, and objectives of the Council. Where an innovative or experimental program may be at variance with one or more accreditation Criteria of the Council, the institution **must** request Commission concurrence prior to implementation of the innovation. Such concurrence shall be based upon the institution's ability

1. to identify the specific Criteria that cannot be applied to the innovation, as well as its (their) related Objectives; and
2. to propose alternate ways to assess the effectiveness of the innovation in achieving the Objectives which are related to the Criteria that cannot be applied to the innovation.



# SECTION III

## Affiliation with COE

Institutions may affiliate with the Council by becoming a candidate for accreditation and subsequently achieving and maintaining accreditation. These two types of affiliation are described below.

### A. Candidate for Accreditation

#### 1. Meaning of Candidate Status

Candidate for Accreditation is a pre-accreditation status of an institution actively seeking accreditation by the Commission. During the period of candidacy, the institution is involved in the process of self-study and planning for a team visit. Candidate status does not imply accreditation of an institution. The institution **must not** use its candidate status in any way to imply, publicly or privately, that candidate status with the Council denotes approval of its programs or accreditation of the institution by the Commission. Institutions in candidate status are not permitted to apply for approval of substantive changes of any kind.

#### 2. Eligibility Requirements

Each educational institution (school, center, unit, or other entity) applying for affiliation with the Council **must** initially demonstrate that it satisfies each of the requirements enumerated below. Taken together, these requirements define the kind of educational organization that the Council considers a part of its institutional universe and within the scope of the accrediting activities for which the Commission assumes responsibility.

To be eligible for consideration by the Commission for candidacy for accreditation (pre-accreditation status), an institution **must** comply with each of the following eligibility requirements:

- a. Meet the Council's definition of 'institution' as described in the *Handbook of Accreditation*
- b. Offer postsecondary instruction exclusively in career and technical education at all campuses on a continuous basis
- c. Offer credentials no higher than an applied associate degree
- d. Demonstrate the institutional capacity to ensure the following: staffing for administrative and faculty needs, responsible financial and facilities management, and support for the institution's programs and services
- e. Have produced a graduate from the longest program offered by the institution where the graduate has completed 100% of the program's required hours at the institution (no hours transferred in and no CLEP hours awarded)
- f. Utilize a campus-based instructional delivery system with at least 25% of the institution's total Full-Time Equivalency (FTE) being derived from enrollments in traditional (bricks and mortar) programs at all campuses
- \*g. Maintain at least 50% FTE enrollment at each campus in non-VESL programs
- h. Have an institutional enrollment of no fewer than 10 FTE
- i. Be legally authorized to operate within the jurisdiction in which it is located for a minimum of one year
- j. Have been in possession of current and applicable licensure/authorization for a minimum of one year

- k. Have been in continuous operation and providing instruction at the main campus and under the same ownership for a minimum of one year
- l. Have the on-site administrator or other full-time employee at the main campus attend the Candidate Academy within 12 months prior to submitting an application for candidate status
- m. Demonstrate that it meets the financial stability requirements for the most recent completed fiscal year (covering 12 months of student class attendance) as stated in Standard 7 - Financial Resources
- n. Be in compliance with Federal requirements applicable to accreditation
- o. Agree to comply with all requirements of the Council

*\* Institutions in candidate or accredited status as of November 4, 2016 whose VESL enrollment is in excess of 50% of the institution's total enrollment as of that date are exempt from this limitation.*

Institutions with non-main campus sites (branches, extensions, extended classrooms, instructional service centers) **must** meet additional eligibility requirements applicable to those locations. Institutions seeking candidate status with the Commission that have non-main campus sites **must** comply with the following additional eligibility requirements:

- a. Demonstrate that the ownership of all branches and extensions is identical to that of the main campus
- b. Demonstrate that the local administrators of all non-main campus sites report to the chief administrator of the main campus
- c. Demonstrate that duplicate records on personnel, financial matters, student attendance, and educational progress for all non-main campus sites are kept at the main campus. (NOTE: Institutions capable of maintaining and accessing records electronically may keep all records previously mentioned at the main campus.)
- d. Demonstrate that names of non-main campus sites are identical to that of the main campus. (Names of non-main campus sites may be expanded, with Commission approval, to identify different locations or specific programs.)
- e. Demonstrate that all non-main campus sites, and their respective program offerings, are described in the main campus catalog and that this description cites the campus' relationship to the main campus

The Council does not accredit institutions that demonstrate the following activities:

- a. Offer instruction via correspondence education [See Section VII. Definitions - Correspondence Education.].
- b. Operate virtual campuses. That is, all campuses accredited by the Council **must** offer at least one traditional program - which demonstrates continuous enrollment - along with any others offered via distance education.
- c. Offer degree credentials of any type other than the applied associate degree.

### 3. Award of Candidate Status

An institution meeting the above requirements **shall** host a candidate visiting team by the Commission (cost to be paid by the institution). The visiting team will submit a written report to the Executive Director within 30 days of the date that the candidate team visit was concluded. The official report will be transmitted to the institution. The institution **must** submit a response to all findings of non-compliance of eligibility and federal regulatory requirements for receipt in the Council office within 30 days of the date that the team report was transmitted from the Council office. (The Commission reserves the right to limit the length of institutional responses to official team reports or other requests for documentation and to require workshop attendance.)

If the team report and the institutional response report show that there is a reasonable expectation of accreditation being achieved within three years, the Commission may grant candidate status to the institution. To become a candidate for accreditation, an institution **must** be approved by the Commission.

Institutions located in states that have no state oversight agency for operational and/or program approval may be required to supply additional information to the Commission before candidacy is granted.

An opinion regarding the reasonable expectation of accreditation being achieved within three years is recorded by the visiting team in the official candidate site visit report. The final determination, however, is made by the Commission. This determination is based upon information gathered through the candidate application and supporting documents, the candidate site visit report, the institution's response to the team report, correspondence between the institution and Council staff or between the Council staff and team members, and/or other sources.

Once candidate status is granted by the Commission, institutions demonstrating progress toward becoming accredited may remain in candidate status for a period not to exceed three years. During the candidacy period, institutions are not permitted to apply for approval of substantive changes of any kind.

Candidate institutions **must** send an on-site administrator or other full-time employee at the main campus to the Commission-sponsored workshops for the preparation of the Self-Study Report and workshops for submitting the Annual Report prior to hosting an accreditation visiting team.

Institutions accepted as candidates for accreditation must host a team visit for initial accreditation no earlier than six months, and no later than 24 months, after candidate status is granted. A valid certificate for required workshop attendance must be on file at the time of the accreditation visit. [See Section III. C. Workshop Attendance Requirements.]

Institutions that fail to host initial accreditation team visits within 24 months after candidate status is granted **will** be dropped from candidate status at the next meeting of the Commission.

Candidate institutions **must** maintain continuous compliance with all requirements for candidate status with the Commission. Any violation of these requirements **will** be cause for the Commission to drop the institution from candidate status.

Institutions that have been dropped from candidate status may not reapply for membership with the Council. Institutions that have voluntarily withdrawn from candidacy may file a new application for candidate for accreditation one year after the effective date of withdrawal.

#### 4. Annual Renewal of Candidate Status

Continuation of candidate status is determined annually by Commission approval of institutional annual reports indicating that candidate institutions are making progress toward meeting the Council's Standards and Criteria. Non-public institutions **must** also submit financial information on an annual basis as described in Section IV. D. 2.

Please note that, according to Section VI - Standard Seven, for initial accreditation, non-public institutions must submit audited financial statements for the two most recent fiscal years that include composite score worksheets prepared by an independent CPA (Criterion 15), and both of these financial statements must reflect a minimum, unrounded composite score of 1.5 (Criterion 16). As stated above in Section III. Affiliation with COE, A. Candidate for Accreditation, 3. Award of Candidate Status, a candidate institution must host a team visit for initial accreditation no later than 24 months from the date candidate status is granted. Therefore, if a candidate institution fails to present an audited financial report that includes a composite score of at least 1.5 for the fiscal year following the year of the audit report that qualified the institution for candidacy with the Commission, the institution may either: 1) withdraw from candidate status and re-apply at a later date when compliance for two (2) consecutive years can be demonstrated, or 2) be dropped from candidate status.

### B. Accreditation

#### 1. Eligibility Requirements

After an institution has been accepted as a candidate for accreditation and becomes an active participant with the Council, the earliest that the institution can host a visiting team for the purpose of initial accreditation is six months after a full-time employee has attended the Commission-sponsored workshops for the preparation of the Self-Study Report and workshops for submitting the Annual Report. To be eligible for accreditation, an institution must comply with the following eligibility requirements:

- a. Continue to meet the eligibility requirements to be a candidate for accreditation.
- b. Demonstrate that the majority of its programs meet all minimum required benchmarks for completion, placement, and licensure exam pass rates for the most recent 12-month period possible.
- c. Occupy its own physical facilities and not be co-located with another institution. (Co-location may include, but is not limited to, the sharing of faculty, staff, websites, links to websites, telephone numbers, and/or physical facilities. See definition for a complete description.)
- d. Have students continuously in attendance for a minimum of two years except for regularly scheduled breaks, holidays, and vacation periods.
- e. For initial accreditation, **non-public institutions** submit audited financial statements for the two most recent fiscal years at least 60 days prior to hosting an initial accreditation visiting team. The first of those two years may be the audited financial statement submitted with the institution's candidate application and the second audited financial statement **must** represent activity while the institution is in candidate status. Both audited financial statements **must** demonstrate compliance with the Commission's financial stability requirements as stated in Standard 7 - Financial Resources. (See Note 1 below for more information.)
- f. Host an initial accreditation team visit no earlier than six months after attending the above-mentioned Self-Study workshops and Annual Report workshops.

(The institution must have a valid certificate for having attended the Candidate Academy and the above-mentioned Self-Study workshops and Annual Report Workshops on file at the time of the team visit. See next requirement and Note 2 below.)

- g. Have the on-site administrator or other full-time employee at the main campus attend the above-mentioned Self-Study workshops and Annual Report workshops within six to 18 months prior to hosting the accreditation visiting team.
- h. Have undergone a self-study based on the mission of the institution and the Standards and Criteria approved by the Council and have filed the required documents with the Commission.
- i. Have undergone a visiting team review.
- j. Have written a letter requesting accreditation and submitted an institutional response to the team report by the chief administrator of the institution. (The response must be received in the Council office within 30 days of the date that the letter requesting a response was transmitted from the Council office. The Commission reserves the right to limit the length of institutional responses to official team reports or other requests for documentation and to require workshop attendance.)
- k. Be accepted by a majority vote of the Commission as meeting the Standards and Criteria of the Council.
- l. Meet the Council's definition of "institution" [See Section VII. Definitions - Institution.]

Visiting teams for initial accreditation or reaffirmation, once scheduled, **will not** be rescheduled without good cause (such as major interruption in leadership or operations). Reaffirmation visiting teams **must** be conducted in the year specified by the Commission. If an accreditation team visit is rescheduled for any reason, the next accreditation cycle **will** be reduced accordingly, a restrictive status (such as Probation) may be assigned, and a financial penalty may be assessed.

#### Institutions Being Considered for Initial Accreditation:

**NOTE 1:** Candidate institutions **must** obtain accredited status within 12 months after the first review for initial accreditation by the Commission. If initial accreditation has not been granted within the twelve-month period immediately following the first deferral of action, the institution **shall** be denied initial accreditation (effectively terminating candidate status with the Council).

**NOTE 2:** Candidate institutions that fail to demonstrate compliance with financial stability requirements prior to hosting an initial accreditation visiting team may either: 1) withdraw from candidate status and re-apply at a later date when compliance for two (2) consecutive years can be demonstrated, or 2) be dropped from candidate status.

## 2. Annual Renewal of Accreditation

Accreditation is for a period of one year from July 1 through the following June 30. Continued accreditation is determined annually by Commission approval of institutional annual reports that verify that accredited institutions are complying with the Council's Standards, Criteria, and Conditions. Non-public institutions **must** also submit financial information on an annual basis as described in Section IV. D. 2.

### 3. Reaffirmation of Accreditation

Reaffirmation of accreditation **must** occur from two to six years after initial accreditation or any subsequent reaffirmation decision. The time interval for reaffirmation is determined by the Commission as a part of its accreditation or reaffirmation decision. Institutions **must** meet the same requirements for reaffirmation as required for initial accreditation. [See Section III. B. 1. Eligibility Requirements.]. At the discretion of the Commission, the institution may be required to undergo reaffirmation earlier than the previously determined year.

Institutions undergoing reaffirmation of accreditation **must** send an eligible representative to Commission-sponsored workshops for the preparation of the Self-Study Report and workshops for submitting the Annual Report within six to 18 months prior to hosting the reaffirmation visiting team. [See Section III. C. Workshop Attendance Requirements.] Beginning six months prior to the original scheduled dates established for hosting an accreditation visiting team, a moratorium on all substantive change approvals (both initial and final) will be in effect and will remain in place until the institution has been granted reaffirmation of accreditation. (Exception: Program additions and changes may be approved after the last day of the initial or accreditation visit only for the purpose of compliance with findings stated in the official team report.)

Institutions being considered for reaffirmation of accreditation **must** obtain reaffirmation within 12 months after the first deferral of action by the Commission. If reaffirmation has not been granted within the twelve-month period immediately following the first deferral of action, the institution **shall** be dropped from accreditation.

An institution that has been dropped from accreditation may file an appeal of the Commission's decision in accordance with the Commission's policies on appealing Commission decisions. [See Section IV. E. 3. Appealable Actions, and the *Policies and Rules of the Commission*, Appeal Process.]

#### C. Workshop Attendance Requirements

Attendance at Commission-sponsored workshops is a requirement before Commission review and approval of certain accreditation statuses.

##### 1. Eligible Representatives

Full-time institutional employees who serve as administrators, liaisons, faculty, and staff of institutions seeking candidate status or accreditation with the Council are eligible to attend required workshops and earn certificates that enable the submission of candidate applications and the scheduling of accreditation team visits. (See specific time lines described in the subsections below.)

Also, persons who are owners or part owners of more than one main campus are considered eligible representatives and may receive certificates of attendance only for the main campus where their office is located.

The following persons are not eligible to meet these attendance requirements:

- a. Institutional corporate owners/employees or public institution district office staff whose offices are not located at a main campus of an institution
- b. Consultants who are contracted to assist institutions with the accreditation process
- c. Contractors hired to provide products or services to candidate and accredited institutions

Certificates of attendance that were earned by former administrators, liaisons, faculty, or staff, are null and void upon their departure from or termination by the institution. Because of this possibility, it may be in the institution's best interest to have more than one eligible representative attend workshops required by the Council.

When workshop attendance is required for a topic that is offered in multiple parts (i.e., Self-Study Part 1 and Self-Study Part 2), all parts of the workshop must be attended by the same individual in order for that individual to earn a certificate of attendance.

## 2. Candidate for Accreditation and Initial Accreditation

Institutions interested in membership with the Council must attend a series of workshops (the Candidate Academy) before an application for approval of candidate status can be submitted. Once an attendance certificate for the Candidate Academy is earned, an institution interested in membership with the Council must submit the application for candidacy within 12 months after the date of attendance.

Institutions accepted as candidates for accreditation must host a team visit for initial accreditation no earlier than six months, and no later than 24 months, after candidate status is granted. A valid certificate for required attendance at Commission-sponsored workshops for the preparation of the Self-Study Report and workshops for submitting the Annual Report must be on file at the time of the accreditation visit.

Institutions that fail to submit their applications for candidacy within 12 months of attending the Candidate Academy must repeat their attendance at this workshop before submitting an application for candidacy. Institutions that fail to host their initial accreditation visit within 18 months of attending the Commission-sponsored workshops for the preparation of the Self-Study Report and workshops for submitting the Annual Report must attend the above-mentioned Self-Study workshops and Annual Report workshops at either the COE Summer Conference or COE Annual Meeting within six to 18 months of hosting their initial accreditation visit.

## 3. Reaffirmation of Accreditation

Institutions currently accredited by the Council that are preparing to host a visiting team for reaffirmation of accreditation **must** attend the Self-Study Workshop and workshops for submitting the Annual Report required by the Council. These attendance certifications **must** be earned no less than six months before – and no more than 18 months before – the institution hosts its team visit. Failure to attend these workshops within this time period may be grounds for an institution to be placed on Probation, and **will** result in the postponement of the accreditation team visit, the levy of a financial penalty, and a reduction in the number of years between accreditation visits. [See Section V. 9. e. Fees and f. Penalties.]

## 4. Annual Reporting

Attendance at workshops for submitting the institutional Annual Report (and for reporting student achievement data) is required of all candidates for accreditation and accredited institutions. Earning these certificates is required as part of the application process for candidate status and the accreditation visit cycle for accredited institutions, as established by the Commission. Institutions **must** provide documentation (workshop attendance certificates) that this requirement is met no less than six months, and no more than 18 months, before an institution hosts a team visit for initial accreditation or reaffirmation of accreditation.

## 5. Team Member/Team Leader Certification

Those who volunteer to serve as the leaders and members of team visits conducted by the Council for candidate status, accreditation, substantive changes, and other circumstances, are required to be certified in the team reporting processes of the Council every three (3) years. Attendance at workshops for team member/team leader certification will fulfill this requirement.

Those who wish to serve as team leaders must maintain team member certification as well as team leader certification.



# SECTION IV

## The Accreditation Process

**T**he components of the accreditation process described below represent the primary means through which the objectives of COE as an accrediting agency are addressed. The process incorporates a comprehensive institutional self-study, peer evaluation, and decision of the Commission based on the Council-approved Standards and Criteria for accreditation.

### **A. The Self-Study**

The primary purpose of the self-study is to examine an institution's qualifications for accreditation through a comprehensive self-evaluation conducted by institutional personnel. The self-study process also serves as a strategic planning vehicle for the improvement of all institutional services. The Council provides guidelines for creating the Self-Study Report in a manual that each institution is expected to use in planning, conducting, and reporting its self-study.

#### **Use of Consultants**

The use of consultants is optional to assist in the self-study process, however, the vast majority of institutions, large and small, achieve accreditation solely through the efforts of their faculty and staff. Clear indication must exist that the faculty and staff were responsible for preparing, revising, and editing any documents required in the accreditation process. Within seven days after employing a consultant for the purpose of assisting in the accreditation process, an institution **must** submit a copy of the consultant's resume to the Council. A consultant may provide assistance to the institution by conducting an on-site workshop for one or more of the following purposes:

1. Acquainting the administration and staff with the self-study process
2. Providing an explanation of the content of the accreditation Standards and Criteria
3. Lending assistance in organizing the self-study effort to maximize staff participation
4. Identifying the types of exhibits or other documentation needed to support or complement the Self-Study Report

Attendance of a consultant at Commission-sponsored Candidate Academy or workshops for the preparation of the Self-Study Report and for submitting the Annual Report does not satisfy the requirements for workshop attendance by the staff and/or faculty of the institution seeking accreditation.

Consultants may not serve as leaders or members of visiting teams scheduled for institutions for which they have contracted their services. Additionally, consultants must not be present during Council site visits required for candidacy, accreditation, focused review, or approval of substantive changes. Anyone who violates this policy will be permanently barred from participation in visiting teams or any other accreditation activity conducted by the Council.

Consultants may not serve in the role of accreditation liaison for an institution and should not contact the Council office for information on behalf of the institution.

## **B. The Site Visit**

The primary responsibility of the visiting team is to determine whether or not the institution is in compliance with the Standards and Criteria required for accreditation by the Council. The visiting team assesses the quality of an institution in light of its stated mission using the Standards and Criteria of the Council as the basis for the assessment. Information sources utilized by team members in conducting the on-site evaluation include the institutional Self-Study Report, documentation available at the institution, interviews with individuals associated with the institution, and observation of conditions and practices.

The Commission is responsible for establishing all requirements related to visiting teams. Those requirements are presented in a separate document containing the guidelines for accreditation visiting teams.

Consultants, if retained, must not be present during Council site visits required for candidacy, accreditation, focused review, or approval of substantive changes.

## **C. Institutional Response Report**

In those instances where a visiting team reports a failure of an institution to comply with one or more Standards, Criteria, and/or Conditions for accreditation (i.e., when the team makes one or more findings of non-compliance), the institution is required to take corrective action immediately. The institution **must** submit a written report that addresses each violation by describing and documenting the action taken by the institution to comply with the requirement. (The Commission reserves the right to limit the length of institutional responses to official team reports or other requests for documentation and to require workshop attendance.)

Institutions that receive no findings or suggestions in an official team report **must** write a letter acknowledging receipt of the team report and requesting initial accreditation, reaffirmation of accreditation, approval of the substantive change, or a positive determination after the Commission's review of a focused visit team report.

Institutional responses (reports or letters) **must** be received within 30 days of the date that the team report was transmitted from the Council office. Specific instructions for preparing and submitting the institutional response report are published in the *Guidelines for Accreditation Visiting Teams* adopted by the Commission.

The Commission often requests the submission of additional documentation as part of the review process before action is taken on a variety of matters. When the Commission requests additional documentation, it reserves the right to limit the length of institutional responses to official team reports or other requests for documentation and to require workshop attendance.

## **D. Annual Documentation Required for Renewal of Candidacy or Accreditation**

### **1. Institutional Annual Reports**

Continued candidate status or accreditation is determined annually by Commission approval of institutional annual reports. Candidate institutions **must** show progress toward meeting Standards and Criteria, and accredited institutions **must** show that they are complying with Standards, Criteria, and Conditions for continued accreditation.

The institution **must** provide all of the applicable information requested in the annual report. Reporting substantive changes in the annual report does not constitute written notification of these changes to the Council.

Failure to submit an annual report or additional information regarding the annual report by the due date established by the Commission **shall** be grounds for an institution to lose its candidate or accredited status.

## 2. Required Submission of Audited Financial Information from Non-Public Institutions

Non-public institutions are required to submit audited financial information to the Council, which **must** include specific information detailed in Section VII. Definitions - Audited Financial Statement of this *Handbook*. The due date for submission of this information occurs annually no later than six months following the end date of the institution's fiscal year. A penalty for late submission of requested documentation will apply to submissions received after the due date.

## E. Commission Action

### 1. Possible Commission Decisions

The Commission has a variety of options for action when making decisions regarding the award, maintenance, or termination of status with the Council for candidate and accredited institutions. The following options are available:

- a. Grant candidate status
- b. Deny candidate status
- c. Renew candidate status (based on submission and approval of an institutional annual report)
- d. Drop from candidacy
- e. Grant initial accreditation
- f. Deny initial accreditation
- g. Renew accreditation (based on submission and approval of an institutional annual report)
- h. Reaffirm accreditation
- i. Deny reaffirmation of accreditation
- j. Impose statuses:
  - (1) Notification of Apparent Deficiency
  - (2) Warning
  - (3) Probation
  - (4) Show Cause Order
- k. Defer decisions
- l. Drop from accreditation
- m. Grant approval of substantive changes
- n. Deny approval of substantive changes

The review of the status of any institution may be conducted periodically as specified in the procedures of the Commission. A focused review may be prompted by a notice of substantive change; by notification of a high default rate or a large increase in the default rate; by a complaint; by notification of possible unethical conduct; or by a possible violation of Standards, Criteria, or Condition adopted by the Council. The Commission may take the same actions in both periodic and focused reviews regarding the institution's status.

With respect to institutions that are currently holding Candidate for Accreditation status, the Commission reviews the Self-Study Report, visiting team report, institutional response, and other sources of information to choose one of three alternative actions: (1) continue candidate status, (2) grant initial accreditation, or (3) deny initial accreditation.

With respect to institutions that are currently accredited, the Commission may continue the institution's accredited status, may assign any of four statuses, or may drop the institution from accreditation.

Institutions will be notified within 30 days of adverse Commission decisions which affect their candidate or accredited status by letter sent by certified mail or other signature-required delivery service addressed to the chief administrator. The letter includes: the decision, a statement of the substance of the basis for the decision, and the deadline for an institutional response or appeal which may be permitted.

In all cases where the number of days for taking action or making a response is specified, "days" means calendar days unless otherwise indicated. In all situations specifying the number of days within which the institution is required to make a response, the deadline is computed from the date the notice prompting such a reply was transmitted by the Commission.

The Commission may, to provide time for supplementary activity, choose not to take action but may defer its decision. Such a deferral causes an institution's status to remain unchanged unless the Commission, in announcing its deferral action, specifies otherwise.

If in the judgment of the Commission the conditions warrant, the Commission may impose one of the four statuses on an institution. A status may be withdrawn by the Commission upon clarification or remediation, but is not subject to appeal.

The four statuses are defined as follows:

### **Monitoring Status**

**Notification of Apparent Deficiency**—Notification of Apparent Deficiency is a status which signifies that the institution is apparently deficient with respect to a requirement of the Commission. The institution has 30 calendar days to respond. This status may be removed at any time by the Commission upon clarification or remediation of the apparent deficiency, or may be changed by the Commission to a violation status.

### **Violation Statuses**

Violation statuses are imposed by the Commission when, after a thorough review of issue-specific documentation, it determines that an institution is in violation of one or more of the Standards, Criteria, and/or Conditions of the Council. Violation statuses, when imposed, are a matter of public record and will be published on the Council's website in the form of a notification.

## Time Period for Compliance

The Commission will require the institution to demonstrate compliance with the agency's Standards, Criteria, and/or Conditions in a time period specified by the Commission, but not to exceed

- (1) twelve months, if the program, or the longest program offered by the institution is less than one year in length;
- (2) 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
- (3) two years, if the program, or the longest program offered by the institution, is at least two years in length.

The Commission may use its discretion to specify a time period for compliance that is more restrictive than those listed above, based upon circumstances. Once the stated time period for compliance expires, the institution **will** be subject to adverse action to be effective by the deadline specified in the Commission's letter. The Commission may extend the time period for compliance with good cause.

Violation statuses can be restrictive or nonrestrictive. A nonrestrictive violation status allows an institution to come before the Commission to seek a grant of initial accreditation or reaffirmation of accreditation, and to apply for substantive change approval. Restrictive violations, however, prevent an institution from seeking a grant of initial accreditation or reaffirmation of accreditation, or approval of any substantive change.

**Warning**—Warning is a nonrestrictive status imposed by the Commission if it determines that an institution is in violation of one or more of the Standards, Criteria, and/or Conditions of the Council. The Commission will require the institution to submit periodic reports during the imposition of this status in order to determine the institution's progress toward compliance. The types and the requirements for reporting will be established by the Commission and may include, but are not limited to, reports on financial stability, administrative capability, and program outcomes. Compliance must be demonstrated within a time period not to exceed that which is based on the length of the longest program offered by the institution (above), but may be more restrictive, based upon circumstances. The deadline for compliance may be extended with good cause. A focused review team, which may include a Commission representative, may be required to visit the institution.

**Probation**—Probation is a restrictive status imposed when, in the judgment of the Commission, there is a violation of Standards, Criteria, and/or Conditions of the Council that must be corrected or the institution will suffer loss of candidate status or accreditation. Probation may be imposed for a period not to exceed one year. Imposition of this status will not extend the original time period for compliance previously specified by the Commission unless good cause has been demonstrated by the institution.

**Show Cause Order**—Show Cause is a restrictive status assigned by the Commission because of one or more serious violations of the Standards, Criteria, and/or Conditions of the Council. Once imposed, Show Cause provides an institution 30 calendar days to show why it should not be dropped. Imposition of this status will not extend the original time period for compliance previously specified by the Commission unless good cause has been demonstrated by the institution.

As stated previously, initial accreditation or reaffirmation of accreditation will not be granted during the time that a restrictive violation status is imposed. Substantive change applications will not be processed, whether new or pending, before the resolution of a restrictive violation status (Probation or Show Cause) or pending an appeal of a decision of the Commission.

When an institution continues to be in violation of Standards, Criteria, and/or Conditions after being placed on Warning, Probation, or issued a Show Cause Order, or where circumstances are deemed sufficiently compelling, the Commission has the responsibility to drop the institution from candidate or accredited status, or to deny initial accreditation or reaffirmation of accreditation, no later than the original deadline for compliance, if any, as stated in the Commission's letter. The Commission shall notify the chief administrator of the institution as to the nature of the action and the procedure to be followed if an appeal is filed. The decision of the Commission is final, subject to the appeal procedure, and will be made known to the public.

No institutional response is required; however, an institution may choose to follow the appeals procedure described in Section IV. E. 3.

An institution that does not choose to appeal may comment in writing regarding the Commission's action provided the response complies with Commission procedures and is received by the Commission within 20 calendar days of the notice of the Commission's action. Any response received by the Commission within 20 calendar days shall be included in the Commission's final report to the appropriate federal, state, and special agencies.

The Commission need not follow any specific sequence in the assignment of statuses. Assignment to any one status is not required before an institution may be assigned to another status. Ordinarily, Warning, Probation, and Show Cause Order status will be assigned in succession to provide an opportunity for remediation and correction before a decision is made by the Commission to drop the institution from accreditation or candidate status. It is important to note that the original time period for compliance specified in the Commission's letter is the maximum length of time allowed to remedy a violation - including the successive assignment of other statuses that may occur during that period. However, where the Commission deems the circumstances sufficiently extreme to warrant a prompt response, it may drop an institution without the prior assignment of any status.

## 2. Appearance before the Commission

Since all Commission decisions are based upon written documents, there are normally two instances where officials of an institution might appear before the Commission:

- a. Upon request by the Commission for the purpose of answering questions concerning an accreditation matter
- b. Upon approval of the Executive Director when the institution is making a special request of the Commission

All requests to appear before the Commission **must** be submitted in writing to the Executive Director and be received at least 30 days prior to the scheduled meeting. Such a request **must** describe in detail why the appearance is necessary. Documentation supporting the request **must** be submitted with the letter.

The Executive Director may approve the request at which time the institution will be informed of the date, time, and place of the appearance. In the event the Executive Director defers action on a request to appear, the matter is taken before the Executive Committee for review and action.

### 3. Appealable Actions

Institutions that have filed a complete application for candidate status, institutions that are accredited by the Commission, and institutions that are seeking approval of a change of ownership or control may appeal the following actions of the Commission:

- a. Denial of candidate status
- b. Drop from candidate status
- c. Decision to deny initial accreditation or reaffirmation of accreditation after the self-study is conducted and a team visit has been hosted
- d. Decision to drop from accreditation (membership)
- e. Decision to deny approval of a change of ownership or control

An appeal **shall** be based on one or more of the following grounds:

- a. Errors and/or omissions in applying the Standards, Criteria, and/or Conditions of the Council were made by the evaluation team(s) and/or the Commission.
- b. Demonstrable bias or prejudice was displayed by one or more members of the Commission, which significantly affected the decision.
- c. The documentation before the Commission at the time of the negative decision was materially in error.
- d. The decision of the Commission was contrary to the substantial weight of the documentation.

If an institution is aggrieved by any one of the four actions listed above, the chief administrator of the institution, with the approval of the governing board of the institution, **must** give notice of intent to appeal such action to be received in the Commission office within 20 calendar days of the date of the notice of the Commission's action. The notice **shall** be submitted to the Commission's Executive Director in the form of a letter sent by certified mail or other signature-required delivery service. The letter **must** include all of the following components:

- a. A request that an appeal board be convened
- b. The specific grounds for the request with a statement explaining the reason(s) for each ground
- c. Documentation (such as a copy of a resolution) showing the approval of such appeal action taken by the institution's governing board
- d. A statement indicating the willingness of the institution to abide by the appeals conditions and procedures

The request **shall** be accompanied by a cashier's check in the amount of \$35,000 to cover the necessary cost of the appeal. The \$35,000 consists of a \$5,000 notice-of-intent-to-appeal fee (non-refundable) and a \$30,000 deposit to cover the costs of the appeal board proceedings. Any funds left over from the deposit will be refunded to the institution. Should there be an outstanding balance after the deposit is applied, the institution **must** pay the outstanding balance.

Upon proper notice of intention to appeal, the prior status of the institution, if any, shall be restored and will remain the same pending the disposition of the appeal.

The Commission is responsible for defining the procedures to be used in the appeal process so as to ensure that the process is fair and equitable for all affected parties.

#### 4. Resolution of Disagreements

##### a. Interpretation of Membership Agreements

As a condition of receiving any status with the Council, each institution agrees that all agreements created by the Commission's granting such status **shall** be deemed to have been entered into in Fulton County, Georgia, and **shall** be interpreted in accordance with the laws of the State of Georgia. Further, each institution agrees that jurisdiction and venue for any action which might arise from any membership agreement between the institution and the Council, regardless of which party shall initiate the action, **shall** be exclusively in the United States District Court for the Northern District of Georgia or the state courts of Fulton County, Georgia, whichever of these courts shall have proper subject matter jurisdiction.

##### b. Litigation Bond

An institution that files suit against the Council **shall** be required to post a bond of \$100,000 per location. Should the court rule in favor of the Council, the institution **shall** pay all court costs, Council attorney fees, and all other costs incurred by the Council in its defense.



# SECTION V

## Obligations of Affiliation

**A**ffiliation of an institution with the Council creates certain obligations that **must** be met by the institution. Those obligations are grouped and described below under two headings: Administrative and Substantive.

### A. Administrative Obligations

#### 1. Chief Administrator

The chief administrator is the administrative head of a **postsecondary** institution with whom primary responsibility for **postsecondary** institutional operation rests. The chief administrator is the first contact of record for the Council and is the person to whom all official correspondence regarding accreditation will be addressed. The chief administrator holds the authority to commit institutional resources and direct activities toward the achievement and maintenance of all obligations of affiliation with the Council. The chief administrator **must** be a full-time employee of the institution and **must** maintain his/her office on-site at the main campus. (Chief administrators often carry titles such as: President, Administrator, Director, Principal, etc.)

#### 2. Accreditation Liaison Officer

The accreditation liaison officer is the person with whom the Commission staff will discuss accreditation matters when the chief administrator is not available. The accreditation liaison officer **must** be a staff member at the main campus. Any staff member - other than the chief administrator - may be designated as the accreditation liaison officer. Accreditation liaison officers **must** report on accreditation matters to the chief administrator. Each institution **must** designate an accreditation liaison officer by notifying the Council.

#### 3. Official Communications

Only written communication from the Commission will be considered official. All official communications from the Commission to candidate or accredited institutions **shall** be transmitted to the chief administrator at the main campus or, if applicable, to the institution's accreditation liaison officer. All official communications from candidate or accredited institutions **must** be from the chief administrator or, if applicable, from the institution's accreditation liaison officer and in written form. All written communications and supporting documentation created by the institution submitted to the Commission **must** be in English. (Written communications may be transmitted to the Commission via email or forms provided on the Council website.)

#### 4. Requested Report or Documentation

Decisions are made by the Commission based on written documentation. Self-certification (attestations) will not be accepted by the Commission as written documentation of compliance with any Condition, Criterion, or Policy.

Any report or documentation requested by the Commission **must** arrive in the Council office by the date due. All reports and supporting documentation created by the institution submitted to the Commission **must** be in English. Failure to submit any report or documentation requested by the due date **shall** be grounds for an institution to lose its candidate or accredited status.

## 5. Confidentiality of Materials

The accreditation of occupational education institutions by the Commission is an activity requiring a high degree of confidentiality. The findings of non-compliance (if any), suggestions, and other information relating to an institution are, by implied agreement, exchanged within an atmosphere of trust, confidentiality, and professional integrity. The Commission makes such information available to the participating institution and to other agencies, accrediting bodies, institutions, or individuals only upon the approval of the participating institution, pursuant to these conditions; as required by law; or as required by federal regulations applicable to accrediting agencies recognized by the U.S. Secretary of Education.

The participating institution may disseminate any of the information it receives from the Commission; however, experience has indicated such dissemination should occur only after the completion of the process leading to an action, not during the process. A number of activities and cautions are employed by the Commission to ensure integrity and institution/Commission confidentiality.

## 6. Maintenance of Accreditation File

An institution that is accredited by the Commission **must** maintain a permanent accreditation file. The file **must** contain the following documents in chronological order:

- a. A copy of all substantive correspondence between the institution and the Commission (COE/COEI) to include, but is not limited to, all letters related to accreditation, reaffirmation of accreditation, substantive changes, and official actions of the Commission
- b. A copy of the last Self-Study Report
- c. A copy of the last accreditation visiting team report and all other team reports since the last accreditation visiting team
- d. A copy of the institution's response report for the last accreditation team and all other response reports to visiting teams since the last accreditation visiting team
- e. A copy of all substantive change applications since the last accreditation visiting team
- f. A copy of all COE annual reports (including all supporting documentation; for example, Record of Allowable Subtractions form, etc.) and, if applicable, annual audited financial information since the last accreditation visiting team

Failure to maintain the accreditation file as requested will call into question the administrative capability of the institution.

## 7. Publication of Status with the Commission

An institution **must** be accurate in reporting its status with the Commission to the public. In catalogs, brochures, advertisements, websites, and news releases, any reference made to its status with the Commission **must** be accurate and **must** include the name and contact information of the Commission as follows: Council on Occupational Education, 7840 Roswell Road, Building 300, Suite 325, Atlanta, GA 30350, Telephone: 770-396-3898 / FAX: 770-396-3790, [www.council.org](http://www.council.org).

Any institution that is found to misrepresent its status with the Commission **shall** issue a news release in the appropriate newspaper and/or other news media to correct the misrepresentation. Documentation that the correction has been made through the news media **must** be submitted to the Commission office.

Each candidate or accredited institution when referring to its status with the Council on Occupational Education **must** use the appropriate choice of the two statements that follow:

*(Name of Institution) is a Candidate for Accreditation by the Commission of the Council on Occupational Education.*

*(Name of Institution) is accredited by the Commission of the Council on Occupational Education.*



Accredited institutions may use the accreditation seal of the Commission of the Council on Occupational Education.

The accreditation seal **must** be used with discretion. It is not to be used for advertising purposes, but rather to identify institutions as being members of a nationally-recognized accrediting agency. The seal may be used only on letterheads, catalogs, certificates, diplomas, transcripts, and websites. If the seal is used on an institution's website, it **must** be linked to the Council's website ([www.council.org](http://www.council.org)).

The Commission may publish, as it deems appropriate, through its Executive Director, information contained in official notification letters from the Commission to the institution which relate to the following actions:

- a. Granting candidate status or accreditation
- b. Extending candidate status or accreditation reaffirmation
- c. Terminating candidate status or withdrawing accreditation
- d. Notifying an institution that there is or may be a violation of a Standard or Condition resulting in placement on a status or being dropped from candidate or accredited status
- e. Denying an application for candidate status, accreditation, or change of ownership or control
- f. Withdrawing from candidate or accredited status

The Commission shall make public the correction of any misleading or incorrect information made public concerning the candidacy or accredited status of an institution, the contents of visiting team reports, or accrediting actions. Misinformation published in the official publications of the Commission shall be corrected in the next issue of the relevant publication. Any misinformation submitted by letter to an institution relative to its status as a candidate for accreditation; its status as to meeting the Standards, Criteria, and/or Conditions of the Council; or the actions of the Commission toward the institution shall be corrected by letter. If the letter containing the misinformation was copied to any federal agency, state agency, another nationally recognized accrediting agency, or anyone else, the letter of correction shall be copied to every agency or person to whom the letter of misinformation was copied.

Likewise, should the Commission discover misleading or incorrect information published by institutions in candidate or accredited status concerning the contents of visiting team reports, accrediting actions of the Commission, or the candidacy or accredited status of the institution, it

shall make public a correction of the misinformation. Additionally, the Commission shall notify all applicable federal agencies, state agencies, and other nationally recognized accrediting agencies of the misinformation.

If an institution's operation, recruiting practices, or other actions become a matter of public or Commission concern, the Commission may announce, through its Executive Director, any action the Commission has taken and the basis for that action, including all pertinent information in the possession of the Commission.

#### 8. Voluntary Withdrawal of Status

A candidate for accreditation or an accredited institution can withdraw its candidate or accredited status at any time by written notification to the Commission. The Commission considers only those documents submitted on institutional letterhead and signed by the chief administrator of the institution as 'official notification'.

Upon receipt of written notification of the intent to withdraw, the Council will send to the school a Withdrawal from Candidacy or a Withdrawal from Accreditation form. When the completed form is received by the Council the request to withdraw will be processed. The effective date of withdrawal from status will be the date the notification is received by the Council, or a future date as specified in the withdrawal form. Withdrawals from status will not be backdated prior to the date the Council receives the institution's official notification.

When an institution voluntarily withdraws its candidate status or accreditation, the Commission shall notify the U.S. Department of Education, appropriate state licensing agencies, and other appropriate agencies of the institution's voluntary withdrawal within 30 days. Should the institution be under a violation status, the notice would indicate that voluntary withdrawal occurred while in that status.

Institutions that fail to submit official notification of their withdrawal from status **will** be listed as withdrawn by a date determined by the Commission based on any and all information available to the Commission at that time (i.e., email notifications from the institution or state/federal agencies).

Failure of a candidate or accredited institution to pay its dues, fees, penalties, evaluation costs, or other financial obligation to the Council within 90 days of the due date **will** be taken by the Commission as conclusive evidence that the institution has voluntarily withdrawn its candidate or accredited status. As indicated above, the notice of the institution's withdrawal for non-payment of its financial obligations shall be sent to the appropriate agencies within 30 days.

Institutions that have voluntarily withdrawn from candidate or accreditation status may file a new application for candidacy for accreditation one year after the effective date of withdrawal. An eligible representative of the institution **must** attend the Candidate Academy prior to submitting the new application. [See Section III. C. Workshop Attendance Requirements.] Institutions that re-apply for membership with the Council **must** pay outstanding invoices, if any, from their prior status before approval for a new application for membership will be considered.

#### 9. Payment of Dues and Fees

##### a. Dues for Candidates for Accreditation

**Dues**—Institutions that have applied to and have been accepted by the Commission as Candidates for Accreditation **must** pay annual dues. Dues are the same for candidates and accredited institutions. [See Section V. 9. b. Dues for Candidate and Accredited Institutions.]

**Initial Payment**—When an institution makes application to the Commission, a cashier’s check for the amount of the annual dues and application fees **must** be attached. The check is made payable to the “Council on Occupational Education.” The initial payment is applied to the fiscal year in which the institution is accepted as a candidate for accreditation with the exception that institutions accepted during the last 60 days of any fiscal year will have their initial dues payment credited to the next fiscal year.

**Annual Payment**—The annual dues for candidate institutions are payable upon receipt of an invoice from the Council on Occupational Education. Institutions will be invoiced prior to the first day of July for annual dues that apply to the fiscal year July 1 - June 30.

**Refund Policy**—An institution that makes application to the Commission and is not accepted as a candidate for accreditation is refunded the initial dues less the actual cost of the candidate visit to the institution and any other expenses incurred. An institution that withdraws its application for candidate for accreditation prior to being accepted will be refunded the dues less the cost of the candidate visit and any other expenses incurred. After an institution has been accepted as a candidate for accreditation, no refund of dues will be made. Application fees are non-refundable.

b. Dues for Candidate and Accredited Institutions

**Annual Dues**—Each candidate or accredited institution **shall** pay annual dues based on enrollment (Full-Time Equivalent or FTE) according to the following schedule.

ANNUAL DUES	
FTE*	Public and Non-Public Institutions
**From 10 to 137	\$ 3,380
138 - 276	3,690
277 - 415	3,980
416 - 553	4,280
554 - 692	4,750
693 - 1,039	5,220
1,040 - 1,386	5,700
1,387 - 2,079	6,400
2,080 - 2,773	6,990
2,774 - 4,160	7,830
4,161 - 6,934	8,890
6,935 - 13,869	10,080
Greater than 13,869	11,260

\* One FTE is equal to 900 student contact (clock) hours, 45 quarter credit hours, or 30 semester credit hours.

\*\* Institutions with less than 10 FTE are not eligible for candidate status with the Council on Occupational Education. [See Section III. B. 1. Eligibility Requirements.].

**Non-Main Campus Dues**—In addition to the annual dues based on total enrollment (FTE) for all campuses, all candidate and accredited institutions **shall** pay annual dues of \$1,500 for each branch campus, \$1,000 for each instructional service center, and \$750 for each extension campus. (Exemption: For institutions in candidate or accredited status with the Commission on June 30, 1985, branches in operation on that date are exempt from branch campus dues.)

**Annual Payment**—Payment of annual dues for candidate and accredited institutions **must** be made after receipt of an invoice from the Council on Occupational Education. Invoices are transmitted prior to July 1 of each year. Annual dues are for the fiscal year July 1 - June 30 and are due July 1.

**Refund Policy**—No refund of annual dues is made to a candidate or accredited institution.

c. Full-Time Equivalent (FTE)

Full-Time Equivalent (FTE) is a unit of measurement used by the Commission to define the amount of scheduled instruction that equates to one full-time student during one academic year. The Commission defines an FTE as 900 contact (clock) hours, 45 quarter credit hours, or 30 semester credit hours of scheduled instruction. The clock or credit hours used to calculate an institution's FTE **must** reflect coursework in which a student has enrolled and matriculated. The FTE does not include hours or credits transferred from other institutions or awarded as CLEP courses. (See *Policies and Rules of the Commission* for a discussion on the rationale for this definition.)

d. Cost of Institutional Evaluations

Institutions **must** reimburse the Council for all costs of institutional team visits (i.e., team visits for candidacy, initial accreditation, reaffirmation of accreditation, focused review, and substantive changes). Reimbursable items include the cost of transportation, lodging, and meals for visiting team members and staff members and/or Commission representatives. Specific procedures regarding deposits, reimbursement, and travel regulations are presented in the *Policies and Rules of the Commission*.

e. Fees

Fees shall be assessed according to the schedule below. All fees shall be non-refundable. Other fees apply to substantive changes. (See chart on pages 35 and 36.)

Application for Candidate for Accreditation .....	\$ 3,000
Warning Status.....	500
Probation Status .....	750
Show Cause Order .....	1,000
Focused Review Visit.....	750
Notice of Intent to Appeal.....	5,000
Initial Accreditation .....	1,000
Renewal of Accreditation .....	1,000
Substantive Change Team Visit Deposit.....	3,000
Non-Public Institution Candidate Team Visit Deposit.....	3,000
Non-Public Institution Accreditation Team Visit Deposit.....	5,000
Third-Party Reviews (See <i>Policies and Rules of the Commission</i> , Third-Party Audit Review.).....	1,500
Deposit for ANNOUNCED Focused Review Site Visit .....	3,000

f. Penalties

Failure to pay dues, fees, penalties, or any charges by the due date .....	10% of the original amount due
Failure to pay fees, penalties, or any charges within 30 days after the due date .....	Additional 20% of the original amount due
Failure to provide annual report or other report by due date .....	\$ 2,000
Failure to attend a workshop required by policy or action of the Commission within the specified time period .....	2,000
Failure to disclose a substantive change to the Commission .....	1,500
Failure to implement an approved substantive change and host a site visit, if required, within 180 days of the date of initial approval .....	1,500
Failure to provide a complete Application, Report, or Response .....	250

g. Deposits

The Council, when requiring a deposit, may apply the unused portion of the deposit (if any) toward outstanding debt owed by an institution.

**B. Substantive Obligations**

1. Institution's Relationship with the Council

a. Institutional Ethics and Integrity

The Commission **must** be assured that any institution which seeks candidate status, accreditation, reaffirmation of accreditation, or approval of a change of ownership or control conducts its affairs with acceptable standards of honesty and integrity. When the Commission has any cause to believe that a candidate or accredited institution has acted in an unethical or untruthful manner, it will evaluate the matter and take action as described in the policies governing statuses. [See Section IV. E. 1. Possible Commission Decisions.]

If an institution misrepresents itself in documents filed with the Commission for purposes of candidate status, accreditation, reaffirmation, or change of ownership or control, the Commission will immediately sever its relationship with the institution and may publish the decision.

Institutions **must** meet all lawful obligations, including those obligations arising from participation in federal student financial aid programs. Failure of an institution to conform to legal obligations imposed by governments and their agencies **shall** be cause for the Commission to remove the institution's candidate or accredited status. The Commission may publish an action taken for such cause.

The Commission may bar an individual from being an owner, an administrator, or a governing-board member of a COE-accredited institution if the individual has been debarred by a government agency or another accrediting agency or was an owner, an administrator, or a governing-board member of a COE-affiliated institution that was denied accreditation, was dropped from accreditation, or closed without providing a teach-out or refunds to currently enrolled students. The decision of the Commission to bar one or more individuals affiliated with an institution will be made at the time when action is taken against the institution and will be communicated to the individual concurrently with the notice of action taken against the institution. The debarment shall contain such conditions and length

of time as the Commission may determine. A person who is barred will have the right to appeal the decision of the Commission. The Commission is responsible for establishing procedures used in appealing debarment to ensure fairness to all affected parties.

b. Maintaining Eligibility Requirements

Each educational institution applying for affiliation with the Council **must** initially demonstrate that it satisfies each of the eligibility requirements to become a Candidate for Accreditation as stated in Section III. A. 2. Candidate for Accreditation: Eligibility Requirements. Further, each educational institution that applies for accreditation **must** demonstrate that it satisfies each of the eligibility requirements for initial accreditation as stated in Section III. B. 1. Eligibility Requirements. An institution **must** continue to meet the requirements for both candidacy and accreditation in order to maintain its accredited status with the Council.

c. Reports

(1) Annual Report

Continued candidate or accredited status is determined annually by Commission approval of annual reports. Candidate institutions **must** show progress toward meeting Standards and Criteria; and accredited institutions **must** show that they are complying with Standards, Criteria, and Conditions adopted by the Council.

(2) Focused Institutional Report

The Commission may request a focused report from an institution if, in the judgment of the Commission, substantive changes, high cohort default rate, the institution's operation becoming a matter of public concern, or conditions justify a re-evaluation of the school's status. Topics or areas of concern to be addressed in the report will be delineated when the report is requested.

An institution that has not had its response to a focused team report accepted by the Commission as having complied with all issues under the re-evaluation of its status within 12 months following the initial review by the Commission, **shall** be dropped from candidate or accredited status.

d. Comprehensive Review for Continuation of Accreditation

Reaffirmation **must** occur from two to six years after initial accreditation or any subsequent reaffirmation decision. The time interval for reaffirmation is determined by the Commission as a part of its accreditation or reaffirmation decision. Institutions **must** meet the same requirements for reaffirmation as required for initial accreditation. [See Section III. B. 1. Eligibility Requirements.] At the discretion of the Commission, the institution may be required to undergo reaffirmation earlier than the previously determined year.

Consultants, if retained, must not be present during Council site visits required for candidacy, accreditation, focused review, or approval of substantive changes.

Institutions seeking reaffirmation **must** complete a Self-Study Report and host a visiting team. Reaffirmation decisions are made by the Commission following a complete review of the Self-Study Report, the visiting team report, and the response report, and other sources of information resulting from the institution's completing a Self-Study Report and hosting a visiting team. An institution that



has not been reaffirmed within 12 months following the initial review by the Commission **shall** be dropped from accreditation.

e. Focused Team Evaluation

Accreditation by the Commission is an expression of confidence that an institution is effectively achieving its stated mission. Circumstances, including actions of an institution which become a matter of constituent or Commission concern, may require a focused review by the Commission. (See *Policies and Rules of the Commission*, Focused Review Teams.)

Consultants, if retained, must not be present during Council site visits required for candidacy, accreditation, focused review, or approval of substantive changes.

Focused review team visits are conducted when certain substantive change applications are received or when, in the judgment of the Commission, a re-evaluation of an institution's compliance with the Commission's Standards, Criteria, Conditions, Policies, and/or procedures is necessary (cost to be borne by the institution). Focused review visits may be conducted as announced or unannounced visits.

Not only may the Commission require an institution to host a focused team visit, it may require an institution to complete a new Self-Study Report and host a full accreditation visiting team earlier than previously scheduled. These Commission actions may be taken for reasons such as, but not limited to: substantive change(s); high cohort default rate; Warning status; an institution's operation becoming a matter of constituent concern; or other conditions that, in the judgment of the Commission, justify a re-evaluation of the institution's status.

The team may evaluate any area of the institution's compliance with the Standards, Criteria, and Conditions of accreditation during a focused team visit. The institution shall be provided a copy of the team's report and **shall** submit its response to the team's findings of non-compliance for receipt in the Council office within 30 days from the date that the report is transmitted from the Council office. (The Commission reserves the right to limit the length of institutional responses to official team reports or other requests for documentation and to require workshop attendance.)

An institution that has not had its response to a focused team report accepted by the Commission as having complied with all issues under the re-evaluation of its status within 12 months following the initial review by the Commission, **shall** be dropped from candidate or accredited status.

Disruption of an institution by forces beyond its control, although not excused, does not result in summary loss of accreditation. Prolonged inability, for whatever reasons, to conduct its programs will require a review of the institution and a reconsideration of its candidate or accredited status. When the alleged circumstances appear to be a violation of Standards, Criteria, or Conditions adopted by the Council, the Executive Director reviews the matter with the Executive Committee and may conduct an inquiry and/or arrange for a focused review site visit.

f. Substantive and Other Changes

(1) Planned and Unplanned Substantive Changes

A substantive change is one which significantly alters an institution's scope, programs, location, standing with another nationally recognized accrediting agency or state or federal agency, financial stability, ownership, or control. A substantive change may be planned or unplanned.

Planned substantive changes within an accredited institution **must** be approved by the Commission or the Executive Director before the changes take place. Institutions in candidate status are not permitted to apply for approval of substantive changes of any kind.

Institutions planning a substantive change **must** first submit to the Council a notice of intent to implement the change at least 30 days prior to submitting the substantive change application. The institution **must** then submit an application for approval (if required) no later than 90 days prior to the change being implemented. Failure to submit applications in a timely manner may delay approval. Approval for substantive changes **must** be granted by the Commission before the changes can be implemented. After applications for approval are received, the Commission provides consulting services to the institution to ensure that an orderly transition, consistent with the procedures of the Commission, is accomplished. The institution **must not** provide a consulting honorarium to the Commission representative or team members but reimburses all expenses.

A moratorium will be placed on the acceptance, processing, and approval (both initial and final) of ALL substantive changes beginning six months prior to the original scheduled dates of accreditation team visits through the date the Commission grants initial accreditation or reaffirmation of accreditation. Waivers of this policy may be granted when changes are mandated by the institution's local school district or state agency. (Exception: Program additions and changes may be approved after the last day of an accreditation visit for initial or reaffirmation of accreditation only for the purpose of compliance with findings stated in the official team report.)

Consultants, if retained, must not be present during Council site visits required for candidacy, accreditation, focused review, or approval of substantive changes.

Failure to implement approved substantive changes within 180 days of the effective date of Commission approval **will** result in the revocation of the initial approval.

The Commission **must** be notified within five working days after an unplanned substantive change occurs. If applicable, a copy of the letter and/or document informing the institution of the unplanned substantive change **must** accompany the notification to the Commission. Within thirty days of notifying the Commission of an unplanned substantive change, the institution **must** submit to the Commission all applications required by the Commission for such a change. The Executive Director will then refer the application(s) to the Commission for action at its next meeting. The Commission reserves the right to require a preliminary visit to the institution prior to granting initial approval.

Substantive change applications are reviewed by the staff, and approval may be given by the Executive Director unless otherwise indicated. The Commission has reserved the authority to approve certain specified substantive changes. The approval by the Executive Director is subject to approval by the Commission.

A substantive change may require a visit by representatives of the Commission. When a visit is required, the team will confirm the accuracy of information provided by the institution in its substantive change application and may evaluate the institution for compliance with any of the Standards, Criteria, and Conditions adopted by the Council. Final approval for planned substantive changes requiring site visits **must** be granted before additional applications for changes requiring site visits will be accepted.

An institution that has not received initial or final approval of a substantive change application within 12 months following the initial review of the initial or final approval documentation **shall** be denied initial or final approval for that change. This circumstance may also call into question the accredited status of the institution.

Failure to notify the Commission of a substantive change may result in the imposition of a penalty or cause loss of candidate or accredited status.

Initial approval for substantive changes **will** be revoked should the institution fail to implement the approved change and/or fail to host any required site visit within 180 days from the effective date of initial approval. The institution will then be placed on the next Commission agenda for consideration of adverse action and penalties may apply.

An application for a planned substantive change shall not be accepted until any unplanned substantive change has been resolved.

Substantive change applications **will not** be processed, whether new or pending, before the resolution of restrictive violation statuses (Probation or Show Cause), during the pending of an appeal of a decision of the Commission, or when an institution is past due on an invoice for money owed to COE.

Institutions that make or propose substantive changes will be required to complete a new comprehensive evaluation of its compliance with Commission Conditions, Standards, Criteria and Policies when those changes meet one of the following guidelines:

1. Multiple changes made or proposed within a 12-month period include BOTH
  - a. a Change in Governance/Control - The institution has made or proposes to make a change to governance/control that requires a site visit as described in the substantive change chart; AND
  - b. changes classified as Institutional, Additional Non-Main Campus Sites, and/or Programmatic Changes - The institution has made or proposes to make any TWO substantive changes that require a site visit that fall under one or more of these headings in the substantive change chart.

2. Change(s) made or proposed compromise its ability to fulfill its responsibility to deliver promised instruction and support services to the students it serves.

One or more substantive changes made or proposed negatively impact the institution's ability to maintain educational programs, physical facilities for students and staff, student services and activities, learning resources, adequate numbers of administrative staff, faculty, and support staff.

3. Change(s) made or proposed compromise its ability to sustain financial stability requirements of the Commission.

One or more change(s) made or proposed negatively impact the institution's ability to maintain compliance with the Commission's financial stability requirements as detailed in Standard Seven – Financial Resources.

The Commission will notify the institution when this requirement is imposed and will require the institution to complete a new institutional Self-Study Report and host a site visit to confirm its compliance with accreditation Conditions, Standards, Criteria, and Policies. The site visit **must** be conducted within 18 months from the date of the Commission's notice to the institution in order for the institution to continue its status with the Commission.

Planned substantive changes include, but are not limited to, the following:

SUBSTANTIVE CHANGE	Documentation Required		Commission Review/ Approval Required	*Site Visit Required	Fee Required
	Public Institutions	Non-Public Institutions			
<b>GOVERNANCE/CONTROL</b>					
Change of Governance	L				
Change of Ownership or Control		A	•	•	\$3,000
Change of Stock, not Control		L			
Change of 50% or More in the Voting Membership of a Non-Profit Institution's Board		A	•	•	\$3,000
<b>INSTITUTIONAL</b>					
Converting a Branch to a Main Campus	A	A	•	•	\$3,000
Main Campus/Branch Campus Relationship Change	A	A	•	•	\$3,000 Per Change
Significant Reduction in Funding Level	L	L			
Merger of Two or More Institutions (See Section VII for definition.)	A		•	•	\$3,000
Change of Name	A	A			\$500
Change of Location (A change of location is defined as a physical relocation of an existing main, branch, instructional service center, or extension campus)	A	A	•	•	\$1,000
Withdrawal from Accreditation/Candidacy	L	L			
Monitoring Institutional Growth (See Monitoring)	L	L			
Contractual Agreements for Consulting or Recruiting (Third-party review fee may apply)	L	L	•		
<b>ADDITIONAL NON-MAIN CAMPUS SITES</b> <i>(Only one application for the establishment of a new non-main campus shall be accepted at a time. An application for a second non-main campus site will not be accepted until after the on-site visit of the first application and final approval is granted by the Commission.)</i> [See Section V. B. 1. g. Non-Main Campus Sites.]					
Branch Campus	A	A	•	•	\$1,500 (Plus Dues)
Extension Campus	A	A	•	•	\$1,500 (Plus Dues)
Instructional Service Center	A	A	•	•	\$1,500 (Plus Dues)
Extended Classroom	A	A	•	•	\$1,500
Permanent Closing of a Non-Main Campus Site	A	A			\$500 Per Location

SUBSTANTIVE CHANGE	Documentation Required		Commission Review/ Approval Required	*Site Visit Required	Fee Required
	Public Institutions	Non-Public Institutions			
<b>PROGRAMMATIC</b>					
New Non-Degree Program - Within Current Scope	M	A			\$500
Change of Scope: New Non-Degree Program - New Occupational Area Outside Current Scope	L	A		•	\$1,000
Change of Scope: Initial Associate Degree Program - Outside Current Scope	A	A		•	\$1,500
Initial/New Associate Degree Program - Within Current Scope	A	A			\$750
Program Relocation/Replication (Non-Public Institutions)	M	A			\$500 Per Location
Change in Existing Program - Increase/Decrease in Length of <u>Less</u> Than 25% (Only one such change per program can be processed within a 12-month period.)	L	A			\$500
Change in Existing Program - Mode of Delivery	M	A			\$500
Change in Existing Program - Increase in Length of 25% or More (Only one such change per program can be processed within a 12-month period.)	M	A			\$500
Change of Program Name	L	L			
Institutional Distance Education Delivery (See Section VII for definition.)	A	A	•	•	\$1,000
Contractual Agreements for Instruction (with entities that are/are not Title IV, HEA certified)	A	A	•		\$1,500
Clock Hour/Credit Hour Conversion	A	A			\$500 Per Program
Deleting an Educational Program (Programs with no students currently enrolled)	L	L			
Teach-Out of a Program (Conducted within the institution)	A	A			
Teach-Out Plans/Agreements (Conducted with an outside entity)	A	A			

**IMPORTANT:** A moratorium will be placed on the acceptance, processing, and approval (both initial and final) of ALL substantive changes beginning six months prior to the original scheduled dates of accreditation team visits through the date the Commission grants initial accreditation or reaffirmation of accreditation.

**EXCEPTION:** Program additions and changes may be approved after the last day of an accreditation visit for initial or reaffirmation of accreditation only for the purpose of compliance with findings stated in the official team report.

Institutions in candidate status and those placed on restrictive violation statuses are not permitted to apply for approval of substantive changes of any kind.

The Executive Director may elect at any time to defer decisions regarding substantive changes to the Commission for approval.

\* Required site visits must be conducted within 180 days of the effective date of initial approval by the Commission and may require a deposit.

A - Application

L - Letter of request that includes program details, location(s) affected, and appropriate approvals

Unplanned substantive changes include, but are not limited to, the following activities:

- (a) The loss of approval or licensure from a state approval agency
- (b) The loss of candidate or accredited status, or being placed on public probation by another nationally recognized accrediting agency, either institutional or programmatic, while a candidate or accredited with the Commission
- (c) The loss of good standing with a regulatory or governing body
- (d) The institution or owner has filed for bankruptcy or gone into receivership
- (e) The findings of a regulatory/oversight agency (e.g., U.S. Department of Education, state approval agency, or nationally recognized accrediting agency) which may affect operations and/or institutional stability
- (f) The permanent or temporary closing of the main campus or an additional site (branch, extension, instructional service center, extended classroom, or other facility)
- (g) A substantial disruption of classes due to faculty walk out, facility eviction, natural disaster, etc.
- (h) An unplanned change of location
- (i) The teaching out of students of another institution

An unplanned substantive change shall be reviewed promptly to determine if the candidate or accredited status should be withdrawn.

(2) Other Changes

- (a) All institutions having status with the Commission should inform the Commission within five working days of any change which would affect communication between the Commission and the institution. Such changes shall include, but are not limited to, the following activities:
  - i) A change in mailing address
  - ii) A change in on-site chief administrator
  - iii) A change in email address of on-site chief administrator
- (b) If a partial change of ownership or control (i.e., less than 50%) occurs for a candidate or accredited institution, the Commission **must be** informed within the time periods prescribed below:
  - i) If less than 50% of the assets of a for-profit corporation are transferred to another person, notification of the transfer must be received in the Commission office at least 30 calendar days before the date that the transfer occurs.
  - ii) If fewer than 50% of the members of the governing board or 50% of the controlling parties of a not-for-profit organization or organization other than a corporation change, notification of the change must be received in the Commission office within 14 calendar days after the date that the change occurs.

### (3) Change to Degree-Granting Status

If an accredited institution begins preliminary discussions that may result in the institution initiating an applied associate degree program, it **must** demonstrate that the program meets all applicable Conditions and accreditation Criteria specified in the *Handbook of Accreditation*.

An application **must** be submitted for approval by the Commission. The application will require documentation that includes, but is not limited to, the following items:

- (a) Authorization for the degree
- (b) Needs assessment and implementation schedule
- (c) Syllabi
- (d) Proposed publication of new program(s) including catalogs, brochures, etc.
- (e) Faculty credentials
- (f) Budgetary information
- (g) Facilities requirement(s)

Upon receipt of a complete application, including all required documentation and application fee, the Executive Director shall conduct a review of the application in accordance with the procedures outlined in the *Policies and Rules of the Commission* and shall refer the application to the Commission for review and action and may request additional documentation.

An institution may apply for subsequent associate degree programs only after final approval of the initial associate degree program has been granted by the Commission.

#### g. Non-Main Campus Sites

A candidate or accredited institution may offer programs at multiple sites to achieve its mission. If an institution conducts educational activities at one or more sites in addition to its main campus, it **must** comply with the definitions and requirements below in designating the type for each site. Procedures for obtaining approval of additional sites are specified by the Commission and presented in the *Policies and Rules of the Commission*. Institutions in candidate status are not permitted to apply for approval of additional sites once candidate status is granted.

The Commission does not approve sites where work-based activities such as internships, externships, clinicals or apprenticeships occur. [See Section VII. Definitions - Work-Based Activities.]

All non-main campus sites approved by the Commission **must** offer instruction on a continuous basis and **must** demonstrate that at least 25% of the FTE at each site is derived from enrollment in traditional, non-VESL programs.

If any site fails to have students in continuous attendance, except for regularly scheduled holidays and breaks, the institution **must** notify the Commission of the status of the site (i.e., closure, suspension, or other).

**Public Institutions Only:** Public institutions adding a third or more non-main campus sites may be granted a waiver of the site visit requirement if certain conditions are met.



A **branch** of a main campus is a subordinate site, not a main campus. The following requirements describe the characteristics of a branch campus (as opposed to any other type of non-main campus site).

A branch campus **must** meet each of the following requirements:

- (1) Operate under the same ownership (same governance, entity, proprietorship or partnership, or the same corporation) as the main campus
- (2) Operate under the supervision of a full-time, on-site administrator who reports to the chief administrator at the main campus
- (3) Bear the same name as the main campus, and must expand the name to clearly identify different locations or specific program offerings of the branch with approval from the Commission
- (4) Comply with all educational requirements and operational policies of the main campus
- (5) Maintain an accurate and Commission-approved listing of program offerings. (Branches may offer different programs than the main campus, providing all programs are approved by the Commission and described in the catalog of the main campus.)
- (6) Comply with the following publication requirements:
  - (a) Does not issue a separate catalog, but may supplement the main campus catalog. (Institutions accredited first by another nationally recognized accrediting agency that requires a separate branch catalog may issue such as long as the institution is accredited by the other accrediting agency.)
  - (b) Ensures that the relationship between the branch campus and the main campus of the institution is clearly specified in all institutional publications
  - (c) Ensures that the complete name of the main campus and the branch is identified in all publications and advertisements when using a campus name
- (7) Keep duplicate records on personnel, financial matters, student attendance, and student educational progress and outcomes data at the main campus
- (8) Provide a full range of student services and activities and comply with all Criteria of Standard 10 – Student Services and Activities
- (9) Maintain the educational integrity of the institution and must not endanger its compliance with the Standards, Criteria, and Conditions adopted by the Council

Should it be necessary to conduct a teach-out of one or more programs offered at a branch campus, the main campus is held responsible for supervision of such activities and for tuition refunds.

An **extension** of a main campus is a subordinate site, not a main campus. The following requirements describe the characteristics of an extension campus (as opposed to any other type of non-main campus site).

An extension campus **must** meet each of the following requirements:

- (1) Operate under the same ownership (same governance, entity, proprietorship or partnership, or the same corporation) as the main campus
- (2) Be located within a fifty-mile radius of the main campus
- (3) Be directly supervised and controlled by the main campus
- (4) Maintain staff who are limited primarily to instructors and support staff
- (5) Maintain personnel and student records at the main campus
- (6) Maintain an accurate and Commission-approved listing of program offerings that meets the educational requirements of the main campus and comply with its operational policies
- (7) Have all program offerings included in the main campus catalog

An **instructional service center** is a temporary or permanent site that serves employers and the public for the delivery of programs or portions of programs to meet a critical or sustained need. The following requirements describe the characteristics of an instructional service center (as opposed to any other type of non-main campus site).

An instructional service center **must** meet each of the following requirements:

- (1) Be a joint venture between the institution and an employer or another educational agency
- (2) Be located within the geographic service area designated by the governing board of the institution
- (3) Ensure that the complete name of the main campus is identified in all publications and advertisements when referring to an instructional service center
- (4) Maintain an accurate and Commission-approved listing of program offerings
- (5) Provide all program instruction under the direct control of the main campus
- (6) Make all student services available on-site, and the full range of student services made accessible to participating students at the main campus
- (7) Maintain duplicate records on personnel, financial matters, student attendance, and student educational progress at the main campus

Typically, students at an instructional service center may participate in Title IV student financial aid programs.

An **extended classroom** of a main campus is a site owned, leased, or rented to provide classroom or laboratory instruction as a part of the total program of the main or branch campus. It offers less than 50% of any program. It **must** be located within two miles of a main or branch campus. The extended classroom **must** be supervised by the chief administrator of the main or branch campus. If the extended classroom begins to offer at least 50% of a program, the institution **must** seek approval to re-classify the campus by submission of an application for approval as a branch or extension.

**Additional space** is that which is acquired for instructional or student services purposes. Additional space acquired **must** be within one quarter of a mile from a main campus or branch campus and may require a site visit. The institution **must** notify the Commission when it begins the process of acquiring additional space.

**NOTE:** Institutions with the capability of maintaining and accessing records electronically at any of the above types of sites may keep all records of personnel, student attendance, financial matters, and educational progress at the main campus.

#### h. Converting a Branch to a Main Campus

A branch **must** exist for two years with all of the services of a main campus and **must** operate in its accredited status with the Commission for one year (of the two years) before being eligible to apply to be a main campus.

Upon receipt of a satisfactorily completed application and a check for the application fee, the Executive Director shall review the application and may request additional documentation or refer the application to the Commission for action at its next meeting. The Commission reserves the right to require a preliminary visit to the main campus and the branch prior to granting initial approval for the conversion of a branch to a main campus.

Within 18 months after the initial approval of the conversion of a branch to a main campus, the institution **must** complete a Self-Study Report and host a visiting team. The visiting team will submit a written report to the Executive Director within 30 days after completing the site visit. A copy of the team report will be transmitted to the institution. The institution **must** submit a response to all findings of non-compliance to the Executive Director for receipt within 30 days of the date that the report is transmitted to the institution.

The cost of the on-site evaluation **will** be borne by the institution. The Executive Director will determine the amount of the deposit for the team site visit that must be conducted.

The Commission shall review the application, Self-Study Report, team report, response report, and other sources of information and will make a decision on final approval of the conversion of the branch to a main campus. The conversion of a branch to a main campus **must** be approved by the Commission before a change of ownership application for the new main campus is submitted.

i. Change of Ownership or Control

A change of ownership or control occurs when the events described below occur.

**For-Profit Corporation**—A change of ownership is the transfer of at least 50% of the assets to another person. A change of ownership or constructive ownership of stock occurs at the time a person obtains or accumulates at least 50% of the total combined voting power of all classes of stock entitled to vote or at least 50% of the total value of shares of all classes of stock. Person includes an individual, trust, estate, partnership, association, company, or corporation. Any change from one ownership structure to another constitutes a change of ownership.

**EXCEPTION:** In cases when the owner of an institution dies, and the owner's interest is transferred to either a family member or another current owner of the corporation (either of whom has been active in the management of the institution for the past two years prior to the aforementioned action), it will not be treated as a change of ownership.

**Not-For-Profit Corporation and Organizations Other Than Corporations**—A change of control occurs when 50% or more of the members of the governing board change or 50% or more of the controlling parties change. The membership of record with the Council for the board or controlling parties is the membership at the time candidacy is granted or approval is granted following a change of control. A change from not-for-profit to for-profit status constitutes a change of control.

All changes of ownership or transfers of control, even in such cases when the owner of the institution dies, **must** be approved by the Commission. Accreditation does not transfer with a change of ownership or control. Following final approval of a change of ownership or control, an eligible institutional representative **must** attend required workshops, and the institution must complete a self-study and host a full accreditation team visit. The timing of the accreditation visit may be adjusted to accommodate the change of ownership process but **must** occur no later than 18 months after final approval is granted. Denial of approval for a change of ownership or control by the Commission effectively drops the institution from status with the Council.

The Commission shall prescribe the procedures used for seeking approval of a change of ownership or control. Those procedures shall be published in the *Policies and Rules of the Commission*.

After an official notification of a change of ownership or control is received from an institution, no substantive change approvals will be granted for pending applications, nor will new applications for substantive changes be accepted, until the Commission grants final approval for the change of ownership or control.

j. Change of Location

A change of location is defined as a physical relocation of an existing main, branch, instructional service center, or extension campus within the institution's service area, and where there is a reasonable expectation for current students, faculty, and staff to continue instruction and/or employment at the new location.

An institution desiring to relocate a main, branch, instructional service center, or extension campus **must** submit an application to the Commission for initial approval at least 90 days prior to the change of location unless the move is an unplanned relocation. [See Section V. B. 1. f. Substantive and Other Changes.]

The Commission shall prescribe the procedures for obtaining approval of a change of location and publish them in the *Policies and Rules of the Commission*.

k. Main Campus/Branch Campus Relationship Change

A main campus/branch campus relationship change occurs when the current main campus of an institution becomes a branch campus, and a branch campus becomes the new main campus of the institution. To qualify as the new main campus, the branch **must** exist for two years with all of the services of a main campus and **must** operate in its accredited status with the Commission for one year (of the past two years) before being eligible to apply to be a main campus. An institution desiring to undertake a main campus/branch campus relationship change **must** first submit a letter of intent to make the change at least 30 days prior to submitting the substantive change application. A main campus/branch campus relationship change application **must** be submitted to the Commission for initial approval at least 90 days prior to the planned implementation date.

Upon receipt of a satisfactorily completed application and a check for the application fee, the Commission shall review the application and, if necessary, request additional documentation. Within 180 days of the date the Commission grants initial approval of the relationship change application the institution **must** host a visiting team. The visiting team will submit a written report to the Executive Director within 30 days after completing the site visit. A copy of the team report will be transmitted to the institution. The institution **must** submit a response to all findings of non-compliance to the Executive Director for receipt within 30 days of the date the report is transmitted to the institution.

The Commission shall review the application, team report, response report, if required, and other sources of information and will make a decision on final approval of the relationship change application.

l. Merger of Two or More Institutions

Two or more institutions accredited by the Commission may merge to form one institution. As a result of this merger, one institution will be designated as the main campus and the other institution(s) will be designated as a branch campus (or campuses) of the main campus. All non-main campus sites of the institutions involved in the merger will be designated as subordinate campuses to the new main

campus according to the requirements of the Commission. The new institution resulting from the merger **must** comply with all the Conditions and Standards of the Commission.

The institution to be designated as the main campus of the merged institutions should submit a letter of intent to the Council at least 30 days prior to submitting the merger application. A merger application should be submitted to the Commission at least 90 days prior to the planned implementation of the merger.

Upon receipt of a satisfactorily completed application and a check for the application fee, the Commission shall review the application and, if necessary, request additional documentation. Within 18 months of the date the Commission grants initial approval of the merger application the institution **must** complete a Self-Study Report and host a visiting team. The visiting team will submit a written report to the Executive Director within 30 days after completing the site visit. A copy of the team report will be transmitted to the institution. The institution **must** submit a response to all findings of non-compliance to the Executive Director for receipt within 30 days of the date the report is transmitted to the institution. The cost of the on-site evaluation **will** be borne by the institution. The Executive Director will determine the amount of the deposit for the team site visit that must be conducted. The Commission shall review the application, Self-Study Report, team report, institutional response to the team report, and other sources of information and will make a decision on final approval of the merger application.

m. Closure

Closing an institution or educational program before enrolled students complete means a decision to discontinue educational activities permanently. Such a decision requires planning and serious consideration of alternatives. Before the decision is reached, the administration **must** consider such alternatives as arranging a teach-out agreement with another institution, merging with another institution, forming a consortium, or participating in inter-institutional sharing and cooperation.

The Commission expects the institution's governing board or chief administrator to use the same planning and responsible leadership during the process of closing an educational program or an institution as with any other planned or unplanned substantive change. For this reason, a decision requires specific plans for providing, in appropriate ways, for the students, faculty, administrative staff, and support staff.

COE requires an institution that is closing an educational program or institution (including those utilizing distance education) to submit for COE approval a teach-out plan upon the occurrence of any of the following events:

- (1) The U.S. Department of Education notifies COE of an action against the institution to limit, terminate, or suspend Title IV eligibility.
- (2) The Commission acts to withdraw, terminate, or suspend the accreditation of an institution or program.
- (3) The institution notifies COE that the institution intends to cease operations at the main campus or any other campus or closes an individual program before enrolled students complete.
- (4) A state licensing or authorizing agency notifies COE that an institution's license or legal authorization to provide an educational program has been or will be revoked.

Institutions **must** comply with all state and federal rules, regulations, and guidelines regarding the closing of an educational program or an institution.

n. Teach-Out

(1) General

The Council's policy for approval of the teaching out of students requires that, at a minimum, all institutions submit an application and a copy of their plan to conduct the teach-out. (See (2) Teach-Out Plan.)

In cases where member institutions partner with other entities to conduct a teach-out of students, a copy of the agreement between the entities involved **must** also be submitted for review and approval. (See (3) Teach-Out Agreement.)

This policy applies to candidate institutions preparing for closure and accredited institutions and all programs affected by a teach-out regardless of the mode of delivery.

(2) Teach-Out Plan

A plan for the teaching out of students from a program or institution **must** be submitted upon the occurrence of any of the following events:

- (a) The Secretary of Education notifies the Council 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.
- (b) A State licensing or authorizing agency notifies the Council that an institution's license or legal authorization to provide an educational program has been or will be revoked.
- (c) The Council acts to withdraw, terminate, or suspend the accreditation or candidacy of the institution.
- (d) The institution notifies the Council that it intends to cease operations entirely or close a location that provides 100% of at least one program, or closes a program before enrolled students complete.

A teach-out plan **must** be consistent with applicable Standards and regulations. [See Section VII. Definitions - Plan.] The plan **must** provide for the equitable treatment of students by ensuring that:

- (a) Students are provided all of the instruction promised by the closed educational program or institution prior to its closure but not provided to the students because of the closure.
- (b) Institutions that are closing work with regulatory agencies to ensure that students are placed.
- (c) Students are notified of additional charges, if any, for completing the course or program at the teach-out institution.

If the Commission approves the teach-out plan that includes a program that is accredited by another accrediting agency, the Commission will notify that agency of the plan's approval.

### (3) Teach-Out Agreement with Another Institution

A teach-out agreement, which is entered into by a COE-accredited institution or at the request of the Commission, **must** be consistent with applicable Standards and regulations. The agreement **must** provide for the equitable treatment of students by ensuring that:

- (a) The agreement is between institutions that are accredited by an accrediting agency recognized by the U.S. Secretary of Education.
- (b) The teach-out institution is geographically proximate to the closed program/institution.
- (c) The teach-out institution can remain stable, carry out its mission, and meet all obligations to existing students.
- (d) The teach-out institution can demonstrate compatibility of its program structure and scheduling to that of the closed program/institution.
- (e) The teach-out institution will provide students with information about additional charges, if any.

Institutions in candidate status with COE are not permitted to seek approval of any type of substantive change, which includes the approval to conduct a teach-out for another institution.

### (4) Closed Institutions

If an institution the Commission accredits or has within candidate status closes without a teach-out plan or agreement, the Commission will work with the U.S. Department of Education and the appropriate State agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charges.

### (5) Teach-Out of Another School

An institution **must** notify and receive Commission approval prior to teaching out students of another institution. The teach-out of programs that are not currently offered by the institution may require a focused team visit in the event that the teach-out programs require special safety precautions and procedures.

#### o. Special Requirements for Monitoring Institutional Growth

##### Full-Time Equivalent

COE monitors increases in total Full-Time Equivalent (FTE) of candidate and accredited institutions by requiring reports from institutions when triggered increases occur. An institution **must** submit a formal notice to the Commission if the institution has an overall increase in FTE of 25% or more of an established baseline. The baseline for each twelve-month period is the FTE calculation reported in the most recent annual report. When an increase of 25% or more is achieved, a formal notice **must** be submitted to the Commission within 30 days. This notice **must** include the rationale for the increase as well as specific data on enrollment in all programs and for all campuses that experienced significant growth involved in the increase of total institutional FTE. Continued reporting of enrollment data by program **will** be required until the submission of the next institutional annual report.

## Gross Revenue for Non-Public Institutions

Additionally, COE considers increases in gross revenue an indicator of institutional growth. Non-public institutions that experience increases in gross revenue of 100% or more from the previous year **must** submit a detailed explanation of the increase to the Commission along with a financial report (which may be internally generated) that demonstrates the increase. The explanation and financial report **must** be submitted to the Commission within 30 days after the experienced increase. An institution that fails to notify the Commission on a timely basis, when required due to an increase in gross revenue, is subject to fees and penalties per the *Handbook of Accreditation*.

### 2. Institution's Relationships with Other Constituencies

#### a. Transfer of Credit

Institutions that elect to accept credit earned from other sources **must** verify that the source of the credit accepted is accredited by an agency recognized by the U.S. Department of Education or whose acceptance is required by a state or federal approving agency.

#### b. Requirements Applicable to Institutional Recruitment Activities

Candidate and accredited institutions **must** demonstrate compliance with the following requirements for recruitment activities for all programs:

- (1) Recruitment activities are truthful and avoid any false or misleading impressions of the institution, its programs and services, or employment.
- (2) Recruiting practices ensure that policies and procedures for admission to programs are made available to prospective students prior to enrollment and communicated within a time frame that is sensitive to deadlines for enrollment and completion of programs should changes to the information occur.
- (3) Materials used in recruitment activities include a policy regarding the transfer of students between programs within the institution and the transfer of students from other institutions that is clearly defined and published, and this information is available to prospective students prior to enrollment.
- (4) Materials used in recruitment activities include a policy regarding the transfer of credits that includes a statement of the criteria established by the institution regarding the transfer of credit earned at other institutions that is clearly defined and published, and this information is available to prospective students prior to enrollment.
- (5) Recruitment practices ensure that prospective students are informed of the costs, equipment, services, time, and technical competencies, if any, required by its programs, including (if applicable), personal data collection and processes, and charges associated with verification of student identity, prior to enrollment.
- (6) Materials used in recruitment activities accurately describe the mission of the institution, instructional outcomes, student performance expectations, and completion requirements of programs.
- (7) State and/or Federal licensure requirements for employment in specific occupational fields, if required, are provided to prospective students prior to enrollment.



The following practices in student recruitment activities **are prohibited**:

- (1) Guaranteeing employment
- (2) Misrepresenting job placement, employment opportunities, or potential salaries for completers
- (3) Misrepresenting program costs
- (4) Misrepresenting abilities required to complete intended programs
- (5) Misrepresenting recruiting personnel as career counselors
- (6) Misrepresenting transfer of credit to or from another institution
- (7) Misrepresenting its accreditation status

c. Requirements Applicable to Advertising

Candidate and accredited institutions **must** demonstrate compliance with the following requirements for advertising for all programs:

- (1) Media used by an institution is truthful and presented with dignity to avoid any false or misleading impressions of the institution, its programs and services, or employment.
- (2) The institution is emphasized more than the accreditation status in all promotional and institutional materials.
- (3) Advertising seeking prospective students that is placed by the institution, its representatives, or third parties appears under "instruction," "education," "training," or a similarly titled classification and is not published under any "help wanted" or "employment" classification.
- (4) Advertisements seeking prospective students that are placed by the institution or its representatives through direct mail, radio, television, internet, or directories clearly indicate that education is being offered, and do not, either by actual statement, commission, or intimation, imply that prospective employees are being sought.
- (5) Media comments do not imply that the institution guarantees employment.
- (6) Media comments do not criticize other institutions.
- (7) Printed bulletins or other promotional information are specific with respect to the prerequisites for admission to the institution's programs, curricula, content of courses, and graduation and employment requirements.
- (8) The institution's physical facilities and educational programs are accurately portrayed in all websites, bulletins, and other publications, whether printed or online.
- (9) A record or copy of all promotional and advertising material is kept on file for three years.
- (10) Full responsibility for all representations made by its recruiting personnel or other employees in recruiting students on its behalf is assumed by the candidate or accredited institution.

d. Contractual Agreements

The role of contractors hired by candidate/accredited institutions must exclude the authority to make official decisions for the institution or to serve in the role of accreditation liaison officer for the institution.

## (1) Contracts for Recruiting and Consulting Services

An accredited institution that enters into a contract for recruiting or consulting services with any agency, corporation, institution, or individual **must** submit a copy of the contract and an official notification form to the Executive Director.

Each contract **must** include a conditional statement stipulating that the contract is not binding in the event that activities involved in the contract prevent the member school from complying with the Standards, Criteria, and Conditions adopted by the Council.

The Commission will review all submissions. The Commission may determine that a third-party review of applications and contracts be performed. In this case, a fee to cover the cost of the third-party review will apply.

## (2) Contracts for Instruction

The Commission classifies contracts for instruction with external entities as substantive changes. External entities are defined as agencies, corporations, institutions, or individuals. These external entities may or may not be certified to participate in Title IV, HEA programs.

Accredited institutions that are eligible to participate in Title IV Financial Aid programs **shall not** contract more than 25% of the instruction of one or more of its programs with an external entity, whether or not that entity is certified to participate in Title IV, HEA programs.

An accredited institution that negotiates a contract for instruction with any external entity **must** submit an application and a copy of the contract to the Executive Director before entering into such an agreement.

All parties to such contracts **must** meet the Standards, Criteria, and Conditions adopted by the Council. Any off-campus instruction must maintain documentation that such activities are in compliance. Each contract **must** include a conditional statement stipulating that the contract is not binding in the event that any circumstances with the contract prevent the member school from complying with the Standards, Criteria, and Conditions adopted by the Council.

An educational program to be taught under a contract **must** have state approval even though it is not intended to be taught at the main or other campuses. If the educational program to be taught under a contract is to be taught at a location that is not yet approved for the institution by the Commission, the institution must submit an application for a new Instructional Service Center designating the location of instruction. Initial approval of the Instructional Service Center application must be granted by the Commission before the institution's students may begin instruction at the new site.

The Executive Director will seek a third-party review for all applications and contracts submitted. (A fee to cover the cost of the third-party review will apply.) The Commission reserves the right to conduct an on-site visit to the institution or other sites that may be involved in the contract prior to granting approval. The Commission will then review the application, the contract, third-party comments, and site visit report (if required) and will make a decision whether or not to approve or deny the submission or to request additional information.

e. Complaints

The Commission reviews certified complaints (as documented on the Complaint Certification Form) that allege non-compliant activities and practices of applicant, candidate, or accredited institutions. This review is described in detail in the *Policies and Rules of the Commission*.

In instances where the nature of the complaint requires immediate action, the Executive Director, with concurrence from the chair of the Commission, may take emergency measures to determine the facts and present them either to the Executive Committee or to the Commission. This may include, but is not limited to, a site visit. Based on the response of the institution or the findings presented by the Executive Director, the Commission will then review the complaint and take action. The Commission may review any complaint (written or oral) that alleges a safety or health problem at an institution.

The Commission determines its own methods of review and action. It will not intervene on behalf of individuals in cases of disciplinary action or dismissal, or act as a court of appeals in such matters as admission, graduation, fees, financial aid, and similar points of issue. The Commission will also transmit to the appropriate agency validated complaints and/or findings when these are potential violations of law, statute, or regulation and so inform the institution.

Legal action taken against candidate and accredited institutions is not considered a violation of any Condition, Standard, Criterion, or procedure of the Commission. However, specific charges made against institutions can be considered a complaint for practical purposes and necessitate further inquiry and/or action by the Commission. (See *Policies and Rules of the Commission*, Issues of Serious Public Concern.)

All candidate and accredited institutions **must** notify the Commission within five working days of being served and **must** provide a copy of the lawsuit against the institution with the notice. The notice and attachment(s) **must** be transmitted to the Council office either in hard copy or via email to the Executive Director at Gary.Puckett@council.org.

The Commission may, as a result of the report of an evaluation team, an interim team, or special deliberations, withhold or withdraw candidate or accredited status. The institution has the right to appeal the decision.

3. Institution's Relationships to Federal Requirements Applicable to Accreditation

Since the Commission is an accrediting agency recognized by the U.S. Secretary of Education, certain requirements of Federal Regulations must be observed with respect to institutions that can be considered for candidacy or accreditation. There are also Federal Regulations that are imposed on the Commission if candidacy or accreditation is granted to institutions under certain conditions. An institution that seeks candidacy or accreditation with the Commission must conform to or allow the Commission to conform to these requirements.

a. Requirements Applicable to Applicants for Candidacy or Accreditation

- (1) The institution is not the subject of an interim action by a state or federal agency potentially leading to the suspension, revocation, withdrawal or termination of the institution's legal authority to provide postsecondary education in any state in which it operates.

- (2) The institution has not had its state license suspended, revoked, withdrawn or terminated, even if the required due process procedures have not been completed within any state in which it operates.
- (3) The institution has not been denied candidacy or accreditation by a nationally-recognized accrediting agency.
- (4) The institution has not voluntarily withdrawn its candidacy or accreditation while not in good standing from a nationally recognized accrediting agency.
- (5) The institution has not had its candidacy or accreditation withdrawn or been placed on public probation by a nationally recognized accrediting agency.
- (6) The institution is not the subject of an interim action by another accrediting agency potentially leading to the suspension, revocation, or withdrawal of candidacy or accreditation.
- (7) The institution has not been notified of the loss of any agency's accreditation even if the due process procedures have not been completed.
- (8) The institution describes itself in identical terms with regard to identity (i.e., main campus, branch campus, branch campus to main campus relationship), mission, governance, programs, degrees, diplomas, certificates, personnel, finances, and constituents to all federal, state, and other agencies, including accrediting agencies.
- (9) Institutions seeking dual accreditation have submitted the reasons for wanting dual accreditation to each accrediting agency and to the Secretary of the U.S. Department of Education, and the institution has designated which agency's accreditation is to be utilized in determining the institution's eligibility for program participation under the Higher Education Act.
- (10) Institutions converting clock hours to credit hours for the purpose of determining federal financial aid eligibility comply with federal requirements for review of course prep hours.
- (11) Institutions being considered for candidate for accreditation, initial accreditation, or reaffirmation of accreditation have given notice at least sixty (60) days prior to hosting the candidate or accreditation team visit in order to provide the public an opportunity to comment on the institution's qualifications for status with the Commission. The notice is posted on the home page of the institution's website and on at least one social media platform until accreditation is granted or reaffirmed. The notice states that the institution is applying to become a candidate for accreditation or for initial or reaffirmation of accreditation with the Commission of the Council on Occupational Education. In addition, it states that persons wishing to make comments should either write to the Executive Director of the Commission, Council on Occupational Education, 7840 Roswell Road, Building 300, Suite 325, Atlanta, Georgia 30350, or submit their comments through the Council's website ([www.council.org](http://www.council.org)). Persons making comments have provided their names and mailing addresses.
- (12) Institutions preparing to host an accreditation visiting team have submitted an evaluation of Standards from one of its occupational advisory committees as part of the documentation required for accreditation team visits. This evaluation requests that advisory committees provide their input regarding the adequacy and relevancy of Commission accreditation Standards. The evaluation form is available on the Council's website ([www.council.org](http://www.council.org)) and must be submitted within 12 months of the institution's scheduled visit, but prior to the preliminary visit.

b. Requirements Applicable to the Commission

- (1) The Commission will not grant candidacy, initial accreditation, or reaffirmation of accreditation to an institution if it knows, or has reasonable cause to know, that an institution applying for candidacy or accreditation (initial or reaffirmation) is the subject of one of the following actions of a recognized institutional accrediting agency or state agency:
  - (a) 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 any state in which it operates
  - (b) A decision by a recognized accrediting agency to deny accreditation or candidacy
  - (c) A pending or final action brought by a recognized accrediting agency to suspend, revoke, withdraw, or terminate the institution's accreditation or candidacy
  - (d) A decision by a recognized accrediting agency to impose Probation or an equivalent status
- (2) The Commission will implement procedures described in the *Policies and Rules of the Commission* when it is notified by the U.S. Department of Education that an institution's cohort default rate equals or exceeds the minimum rates established by the U.S. Department of Education.
- (3) The Commission will take adverse action for failure of an institution to demonstrate compliance with the Standards, Criteria, and/or Conditions of the Council within 12 months immediately following the first deferral of action by the Commission, unless the Commission extends the time period for compliance with good cause. [See Section VII. Definitions - Good Cause.]
- (4) The Council, when it has information regarding a candidate or accredited institution's compliance with its Title IV, Higher Education Act (HEA) program responsibilities, including its eligibility to participate in Title IV programs, will submit the information to the Secretary when it is requested to assist in resolving problems with the institution's participation in these programs.
- (5) The Commission will submit the name of the institution to the Secretary, along with the reason(s) for concern, when it has reason to believe that an institution accredited by the Commission is failing to meet its Title IV, HEA program responsibilities, including, but not limited to, a negative compliance audit or program review finding, or is engaging in fraud or abuse. The Commission will comply when the Department of Education specifies that information shared between the Department and the Commission be kept confidential.
- (6) The Commission will submit a summary of the Commission's major activities during the previous year upon request from the Secretary of Education.
- (7) The Commission shall maintain complete and accurate records of its last review of each institution and an accurate, permanent record of its decisions with respect to candidate and accredited institutions.
- (8) The Executive Director shall notify, at the same time, the Secretary of the U.S. Department of Education, the appropriate state licensing or authorizing agency, the appropriate accrediting agencies, and the public within 24 hours, but no later than 30 days, after the following actions have occurred:
  - (a) Accepting an institution as a candidate for accreditation, accrediting an institution, or reaffirming accreditation of an institution

- (b) Making a final decision to place a candidate or accredited institution on Probation or Show Cause
  - (c) Making a final accrediting decision involving denial, termination or suspension of candidacy or accreditation (to be provided as a summary of the review that resulted in this action, including comments from the affected institution or notification that the institution was given the opportunity to provide comments)
  - (d) Having been informed by an institution that it is voluntarily withdrawing from candidacy or accreditation
  - (e) Ascertaining that an institution has allowed its candidacy or accreditation to lapse
- (9) The Executive Director shall notify the Secretary of the U.S. Department of Education, the appropriate state licensing or authorizing agency, and the appropriate accrediting agencies at the same time it notifies an institution if the Commission makes a final decision to deny or withdraw candidacy or accreditation or take other adverse action against an institution.
  - (10) The Executive Director shall notify the public within 24 hours of its notice to an institution if the Commission makes a final decision to deny or withdraw candidacy or accreditation or take other adverse action against an institution.
  - (11) The Executive Director shall make available to the Secretary of the U.S. Department of Education, the appropriate state licensing or authorizing agency, and the public a summary of the Commission's decision to deny, limit, suspend, or withdraw the candidacy or accreditation of an institution no later than 30 days after a final decision is made.
  - (12) A copy of the annual report of the Council on Occupational Education will be submitted to the U.S. Secretary of Education as soon as the report is printed each year.
  - (13) The Commission will initiate action to make changes to its Standards within 12 months of determining that it needs to do so, and will complete that action within a reasonable period of time. Furthermore, before any changes to Standards are finalized, the Commission will provide notice to all relevant constituencies and other interested parties of the changes the Commission proposes to make and will provide those parties the opportunity to comment on the proposed changes. All comments submitted regarding proposed changes to the Standards will be taken into account.
  - (14) All proposed revisions in the Standards, Criteria, Conditions, and/or procedures of the Council will be submitted to the U.S. Secretary of Education at the same time that they are submitted to the membership for consideration, if the revisions might alter the Council's scope of recognition or its compliance with the requirements for submission of information to the Secretary. Additionally, the Council will post these actions on its website ([www.council.org](http://www.council.org)) in order to encourage input from potential employers and the general public.

c. Non-Discriminatory Policy of the Council

The Council does not discriminate on the basis of sex, race, color, national origin, age, or disability in any of its programs or activities.

Any individual who believes that he or she has been discriminated against because of his/her sex, race, color, national origin, age, or disability should immediately contact the Executive Director, Dr. Gary Puckett, who is the Council's coordinator for Title IX compliance. Dr. Puckett can be reached at 7840 Roswell Road, Building 300, Suite 325, Atlanta, Georgia 30350, (770) 396-3898, ext. 105.

Complaints alleging discrimination on any of the above circumstances may also be made to:

The Office for Civil Rights  
U.S. Department of Education, Customer Service Team  
Hotline # 1-800-421-3481 or (202) 205-5413  
Fax # (202) 205-9862 TTY # (877) 521-2172  
[ocr@ed.gov](mailto:ocr@ed.gov)

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# **SECTION VI**

## **Accreditation Standards, Objectives, and Criteria**

**T**he Standards, Objectives, and Criteria for accreditation by the Council are derived from the mission, goals, and objectives of the Council as an accrediting agency. [See Section II. C. Mission, Goals, and Objectives of the Council.]

The specific Objectives of the COE accreditation process, as used in evaluating providers of occupational education, are grouped within 10 categories or “Standards” representing institutional aspects to be evaluated by the COE accreditation process. The Objectives subsumed by each Standard provide more specific delineation of the scope of each Standard and the basis for deriving the Criteria addressed in conducting an institutional evaluation for accreditation. The Standards are the following:

**Standard 1 - Institutional Mission**

**Standard 2 - Educational Programs**

- A. Program Alignment and Administration
- B. Occupational Advisory Committee Activities
- C. Instructional Activities
- D. Coursework Delivered via Distance Education
- E. Work-Based Activities
- F. Associate Degree Nursing Programs

**Standard 3 - Program Outcomes**

**Standard 4 - Strategic Planning**

**Standard 5 - Learning Resources**

- A. Media Services
- B. Instructional Equipment
- C. Instructional Supplies

**Standard 6 - Physical Resources and Technical Infrastructure**

**Standard 7 - Financial Resources**

**Standard 8 - Human Resources**

- A. General
- B. Faculty
- C. Administrative and Supervisory Personnel
- D. Instructional Support Staff
- E. Non-Instructional Support Staff/Services

**Standard 9 - Organizational Structure**

**Standard 10 - Student Services and Activities**

The Criteria listed in each Standard support the achievement of Objectives stated at the beginning of each Standard.

Institutions are required to provide documentation to demonstrate compliance with each Criterion of the Standards.

# STANDARD ONE

## Institutional Mission

### Objectives of Accreditation Related to “Institutional Mission”

1. To ensure that the institution’s primary mission is career and technical education
2. To ensure that the current mission is clearly stated and is publicly available
3. To ensure that the mission is formulated and promoted with broad-based participation by communities of interest

### Criteria of Accreditation Related to “Institutional Mission”

1. The primary mission of the institution is to instruct students to such competency levels that they are qualified for initial employment and/or career advancement. (Objective 1-1)

The institution’s mission is

2. clearly and concisely stated in written form,
  3. published in hard copy and/or online,
  4. publicly available, and
  5. used consistently in publications.
- (Objective 1-2)

6. The institution has an organized and functional institutional advisory committee that meets the following requirements:
  7. Is composed of no less than three persons, all of whom are external to the institution. (Committees larger than three members **must** maintain a majority of external members.)
  8. Has at least three external members who meet these criteria present at each meeting (with at least two members physically present and one virtually present).
  9. Meets at least once annually.
  10. Keeps typed minutes to document its activities, recommendations, and meeting attendance.
  11. Is used to seek input and provide community involvement in maintaining a relevant mission for the institution.

*The criteria above represent the minimum requirements for an institutional advisory committee. The institutional advisory committee can also serve as the occupational advisory committee if only one occupational advisory committee is required for the institution. In those cases, the requirements of both committees (institutional and occupational) must be met. (See Policies and Rules of the Commission for more information regarding “Requirements for Institutional Advisory Committees”.)*

(Objective 1-3)

# STANDARD TWO

## Educational Programs

### Objectives of Accreditation Related to “Educational Programs”

#### A. Program Alignment and Administration

1. To verify that the educational programs offered by the institution align with the mission of the institution, have clearly-stated objectives, and have content that remains current and meets the needs of constituents
2. To ensure that all programs are evaluated using methodologies reflective of the professional and practice-based competencies of their respective occupations
3. To ensure that all programs offered by the institution, regardless of location or method of delivery, are qualitatively and quantitatively consistent
4. To ensure that all programs are approved and administered with involvement of administrators and faculty
5. To verify that entry level earnings of completers is considered in relation to the cost and length of programs
6. To ensure that the title, program length, and general education components of all associate degree programs offered meet or exceed the minimum acceptable requirements as defined in the Criteria
7. To ensure that the clock hour to credit hour ratio meets the minimum acceptable requirements as defined in the Criteria

#### B. Occupational Advisory Committee Activities

1. To ensure that each program incorporates current job market requirements in its instruction through involvement of the constituencies served
2. To ensure that advisory committees represent industry interests of communities served and that official meetings are conducted with appropriate frequency and in appropriate formats
3. To ensure that occupational advisory committees provide the institution with state-of-the-industry updates/information and projections of changes that may occur within the industry that committee members represent
4. To ensure that occupational advisory committees assess program graduation requirements as an indicator of the level of completer preparedness

### **C. Instructional Activities**

1. To ensure the integration of academic and occupational education in programs
2. To ensure that instructional activities include knowledge, skills, work habits, and attitudes required of the occupation
3. To ensure that instruction for each program is organized **and sequenced** to achieve its objectives
4. To ensure that all programs are offered using methodologies reflective of professional and practice-based competencies and provide for timely and meaningful interaction among faculty and students
5. To ensure that job-related health and safety elements are incorporated into curricula as appropriate to the occupation
6. To ensure that instruction includes orientation to technology appropriate for the occupation and that practice using current workplace technologies, equipment, and materials is provided to students in order to develop skill proficiency for the profession
7. To ensure that methods of evaluating individual student achievement indicate a focus on student achievement, learning objectives **and competencies** and that the results are made part of the student's permanent record
8. To ensure that opportunities are provided for students to obtain exposure to and appreciation of the dynamics of the industry/occupational environment for which they are being prepared

### **D. Coursework Delivered via Distance Education or Hybrid**

To ensure that the institution is compliant with relevant elements regarding the delivery of instruction via distance education **or hybrid** methods and can document, at a minimum, that academic rigor, faculty interaction with students, currency and quality of courseware and templates used for instructional delivery, student identity confirmation, and measurement of student progress are addressed

### **E. Work-Based Activities**

To require that work-based activities have objectives appropriate for the respective programs and are properly planned for and supervised by qualified individuals

### **F. Associate Degree Nursing Programs**

To ensure that associate degree nursing programs jointly accredited by the Council on Occupational Education (COE) and the Accrediting Commission for Education in Nursing (ACEN) meet all criteria applicable to the agencies' standards

## **Criteria of Accreditation Related to “Educational Programs”**

### **A. Program Alignment and Administration**

The institution has implemented a systematic process to document that each program

1. aligns with the mission of the institution,
2. has clearly stated objectives,
3. has content relative to its objectives and aligned with the needs of the people and industries served by the program,
4. is evaluated annually to ensure currency of its objectives and content,
5. has varied evaluation methodologies that reflect established professional and practice-based competencies, and
6. includes coursework that is qualitatively and quantitatively consistent at each campus where it is offered.

(Objectives 2-A-1 through 2-A-3)

The institution ensures that each program

7. is approved and administered under established institutional policies and procedures and supervised by an administrator who is part of the institutional organization, and
8. includes on-campus administrators and faculty in planning activities.

(Objective 2-A-4)

9. The institution considers the length and the tuition of each program in relation to the documented entry level earnings of completers.

*NOTE: The Employer Program Verification Form must be completed by potential employers of program graduates (Occupational Advisory Committees) to assist in documenting compliance with this Criterion.*

(Objective 2-A-5)

Each associate degree program meets the following requirements:

10. The program is designed to lead graduates directly to employment in a specific career.
11. The appropriate applied degree title, such as Associate of Applied Technology, Associate of Applied Science, Associate of Occupational Studies, Associate of Science, or Associate of Occupational Technology, is used and includes the specific career and technical education field (i.e., Associate of Applied Science in Veterinary Technology).
12. The program has a minimum of 60 semester hours or 90 quarter hours.
13. The program includes a minimum of 15 semester hours or 23 quarter hours of general education courses that are not applicable to a specific occupation, with a minimum of one course from each of the following areas: humanities, behavioral sciences, natural or applied sciences, and mathematics.

(Objective 2-A-6)

14. A credit hour is equivalent to a minimum of each of the following: one semester credit for 15 clock hours of lecture, 30 clock hours of laboratory, or 45 clock hours of work-based activities; or one quarter credit for 10 clock hours of lecture, 20 clock hours of laboratory, or 30 clock hours of work-based activities. (Objective 2-A-7)

## B. Occupational Advisory Committee Activities

1. Occupational advisory committees are appointed for each program to ensure that desirable, relevant, and current practices of each occupation are being taught. (Objective 2-B-1)

Each occupational advisory committee complies with the following requirements:

2. Consists of a minimum of three members external to the institution
3. Represents expertise in the occupational field(s) for which the program prepares students
4. Represents each service area covered by the program at each meeting (all locations)
5. Has at least three external members who meet these criteria present at each meeting
6. Conducts at least one face-to-face meeting **annually** with at least two of the three required external members physically present (one **or more** external members may be virtually present)
7. Follows an agenda and maintains typed minutes to document its activities, recommendations, meeting attendance, and demographic information for each member

*NOTE: Additional guidance regarding occupational advisory committees is provided in the Policies and Rules of the Commission.*

(Objective 2-B-2)

8. Occupational advisory committees review each educational program **no less than once annually and provide the institution with state-of-the-industry updates/information and projections of changes that may occur within the industry that committee members represent. (See Policies and Rules of the Commission for more information regarding "Requirements for Occupational Advisory Committees".)** (Objective 2-B-3)
9. **Occupational advisory committees assess program graduation requirements as an indicator of the level of completer preparedness.** (Objective 2-B-4)

*NOTE: The Employer Program Verification Form may be completed by members of the occupational advisory committee. Only three signatures per program are required.*

## C. Instructional Activities

1. Academic competencies are integrated into the curriculum or instructional plan for each occupational program. [See Section VII. Definitions - Plan.] (Objective 2-C-1)
2. Each program provides instruction in the occupational skills essential to success in the occupation, including job knowledge, work habits, and attitudes. (Objectives 2-C-2 and 2-C-4)
3. The sequence of instruction required for program completion (lecture, lab, and work-based activities) is determined by desired student learning outcomes. (Objective 2-C-3)

The organization of syllabi, lesson plans, competency tests, and other instructional materials is used to

4. define a sequence for the achievement of objectives,
5. guide the delivery of instruction,
6. direct learning activities, and
7. indicate benchmarks for student progress that are indicated in the student's permanent record.

(Objective 2-C-3)

8. To develop skill proficiency, sufficient practice is provided with equipment and materials similar to those currently used in the occupation. (Objectives 2-C-4, 2-C-6, and 2-C-8)
9. Job-related health, safety, and fire prevention are an integral part of instruction and are incorporated into curricula as is appropriate to the occupation. (Objective 2-C-5)
10. Orientation to technology is provided and technical support is available to students. (Objective 2-C-6)
11. A systematic, objective, and equitable method of evaluating student achievement based on learning objectives and required competencies has been implemented. (Objective 2-C-7)

#### **D. Coursework Delivered via Distance Education or Hybrid**

1. Distance education or hybrid courses and programs are identical to those on campus in terms of the quality, rigor, breadth of academic and technical standards, completion requirements, and credentials awarded.
2. Faculty teaching distance education or hybrid courses ensure timeliness of their responses (synchronously or asynchronously) to students' requests by following institutional requirements on response times of no more than 24 hours within the published operational schedule of the program/course.
3. The institution has processes in place to determine that the student who registers for a distance education or hybrid course or program is the same student who participates in and completes the course or program and receives the academic credit (with methods such as secure logins, pass codes, or proctored examinations).
4. The institution directly verifies the currency and quality of all contracted courseware on an annual basis, is directly responsible for such currency and quality, and maintains curriculum oversight responsibility within all contracts.
5. Each course/program has in place a standardized template, course descriptions, learning objectives, course requirements (e.g., standard syllabus, outcomes, grading, resources, etc.), and learning outcomes in order to facilitate quality assurance and the assessment of student learning.
6. The institution monitors student progress in distance education or hybrid activities; such monitoring may include frequency of log-in time, confirmation of student time online, and the percentage of coursework completed.

(Objective 2-D)

## **E. Work-Based Activities**

Written agreements with work-based activity partners, if any,

1. are current,
  2. specify expectations for all parties, and
  3. ensure the protection and safety of students.
4. Each work-based activity has a written instructional plan for students (that includes partners external to or within the institution). [See Section VII. Definitions - Work-Based Activities and Plan.]
  5. The instructional plan for each work-based activity specifies particular objectives, experiences, competencies, and evaluations that are required.
  6. The instructional plan for each work-based activity designates the on-site individual(s) responsible for guiding and overseeing supervision of students' learning experiences and written evaluations.
  7. Work-based activities conducted by the institution are coordinated by a designated institutional employee possessing appropriate qualifications.  
(Objective 2-E)

## **F. Associate Degree Nursing Programs**

1. The governing organization and nursing education unit ensure representation of the nurse administrator and nursing faculty in governance activities; opportunities exist for student representation in governance activities.
2. Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.
3. The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.
4. The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.
5. When present, the nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified.
6. The nurse administrator has authority and responsibility for the development and administration of the program and has sufficient time and resources to fulfill the role responsibilities.
7. The nurse administrator has the authority to prepare and administer the program budget with faculty input.
8. Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the purpose and outcomes of the nursing program.



9. Full-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency. They are qualified to teach the assigned nursing courses. (Full and part-time faculty include those individuals teaching and/or evaluating students in the classroom, clinical, or laboratory settings.)
10. Part-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency. They are qualified to teach the assigned nursing courses. (Full and part-time faculty include those individuals teaching and/or evaluating students in the classroom, clinical, or laboratory settings.)
11. Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have documented roles and responsibilities.
12. The number and qualifications of staff within the nursing education unit are sufficient to support the nursing program.
13. Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.
14. The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.
15. The curriculum and instruction processes reflect educational theory, interprofessional collaboration, research, and current standards of practice.
16. Courses required for each program are offered with sufficient frequency for the student to complete the program within the publicized time frame.
17. Student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes.
18. Fiscal resources are sustainable, sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and commensurate with the resources of the governing organization.
19. The nursing program has a current systematic plan of evaluation.

The systematic plan of evaluation contains the following components:  
[See Section VII. Definitions - Plan.]

20. Specific, measurable expected levels of achievement for each end-of-program student learning outcome and each program outcome
21. Appropriate assessment method(s) for each end-of-program student learning outcome and each program outcome
22. Regular intervals for the assessment of each end-of-program student learning outcome and each program outcome

23. Sufficient data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome and each program outcome
24. Analysis of assessment data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome and each program outcome
25. Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of each end-of-program student learning outcome and each program outcome
26. The evaluation of Associate Degree Nursing Programs demonstrates that students have achieved each end-of-program student learning outcome and each program outcome.
27. The program demonstrates evidence of students' achievement of each end-of-program student learning outcome.
28. There are ongoing assessments of the extent to which students attain each end-of-program student learning outcome.
29. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome.
30. The program demonstrates evidence of graduates' achievement on the licensure examination. The program's most recent annual licensure examination pass rate will be at least 80% for first-time test-takers during the same 12-month period.
31. There is an ongoing assessment of the extent to which graduates succeed on the licensure examination.
32. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates' success on the licensure examination.
33. There are a minimum of the three (3) most recent years of available licensure examination pass rate data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion.
34. The program demonstrates evidence of students' achievement in completing the nursing program.
35. The expected level of achievement for program completion is determined by the faculty and reflects student demographics.
36. There is an ongoing assessment of the extent to which students complete the nursing program.
37. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' completion of the nursing program.

38. There are a minimum of the three (3) most recent years of annual program completion data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.
39. The program demonstrates evidence of graduates' achievement in job placement.
40. The expected level of achievement for job placement is determined by the faculty and reflects program demographics.
41. There is an ongoing assessment of the extent to which graduates are employed.
42. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates being employed.
43. There are a minimum of the three (3) most recent years of available job placement data, and data are aggregated for the nursing program as a whole.  
(Objective 2-F)

# STANDARD THREE

## Program Outcomes

### Objectives of Accreditation Related to “Program Outcomes”

1. To verify that the institution evaluates program outcomes through a systematic plan for assessing program effectiveness, efficiency, and relevance by achieving specified quantitative requirements for: (a) program completion, (b) job placement, and (c) licensure examinations [See Section VII. Definitions - Plan.]
2. To ensure that program completers and employers are satisfied with the education that was received

### Criteria of Accreditation Related to “Program Outcomes”

1. The institution submits accurate program completion data each year to the Commission for comparison with required benchmarks. (Objective 3-1)
2. The institution submits verifiable program completion data each year to the Commission for comparison with required benchmarks. (Objective 3-1)
3. **FOR INITIAL ACCREDITATION ONLY:** The majority of programs meet the required benchmark for completion for the most recent 12-month period possible. (Objective 3-1)
4. **FOR ACCREDITED INSTITUTIONS ONLY:** All programs meet the required benchmark for completion OR the institution has taken any actions required by the Commission due to program completion rates failing to meet the required benchmark. (Objective 3-1)
5. The institution submits accurate program placement data each year to the Commission for comparison with required benchmarks. (Objective 3-1)
6. The institution submits verifiable program placement data each year to the Commission for comparison with required benchmarks. (Objective 3-1)
7. **FOR INITIAL ACCREDITATION ONLY:** The majority of programs meet the required benchmark for placement for the most recent 12-month period possible. (Objective 3-1)
8. **FOR ACCREDITED INSTITUTIONS ONLY:** All programs meet the required benchmark for placement OR the institution has taken any actions required by the Commission due to program placement rates failing to meet the required benchmark. (Objective 3-1)
9. If applicable, the institution submits accurate licensure exam pass rate data each year to the Commission for comparison with required benchmarks. (Objective 3-1)
10. If applicable, the institution submits verifiable licensure exam pass rate data each year to the Commission for comparison with required benchmarks. (Objective 3-1)
11. **FOR INITIAL ACCREDITATION ONLY:** If applicable, the majority of programs meet the required benchmark for licensure exam pass rates for the most recent 12-month period possible. (Objective 3-1)

12. **FOR ACCREDITED INSTITUTIONS ONLY:** All applicable programs meet the required benchmark for licensure exam pass rate OR the institution has taken any actions required by the Commission due to licensure exam pass rates failing to meet the required benchmark. (Objective 3-1)
13. The institution has a written plan to ensure that program outcomes follow-up is systematic and continuous. (Objective 3-2)

The institution's written plan for program outcomes follow-up includes the following elements:  
[See Section VII. Definitions - Plan.]

14. Identification of responsibility for coordination of follow-up activities
15. Methods for collection of data on completion, placement, and licensure exam pass rates
16. Information collected from completers and employers of completers that is focused on program effectiveness
17. Methods for surveying completers and employers of completers to assess the level of satisfaction with the education that was received  
(Objective 3-2)
18. The program outcomes follow-up plan is reviewed annually by the faculty and administration (and revised as necessary). (Objective 3-2)
19. Program outcomes follow-up information is used to evaluate and improve the quality of program outcomes. (Objective 3-2)
20. Follow-up information is made available at least on an annual basis to instructional personnel and administrative staff. (Objective 3-2)

# STANDARD FOUR

## Strategic Planning

### Objectives of Accreditation Related to “Strategic Planning”

1. To ensure that the institution uses a systematic process to determine its effectiveness in accomplishing its mission
2. To ensure that strategic planning leads to the establishment of priorities and appropriate action
3. To ensure that a procedure is used to gather and utilize objective data for strategic planning and to facilitate the institution’s process of continuous improvement
4. To ensure that the strategic plan is subject to systematic and periodic review and evaluation by the communities of interest served by the institution

### Criteria of Accreditation Related to “Strategic Planning”

1. The institution has a written strategic plan. [See Section VII. Definitions - Plan.] (Objectives 4-1 through 4-4)

The institution’s written strategic plan includes, at a minimum, the following components:

2. The mission of the institution
3. The vision of the institution
4. Objectives for a minimum period of three years (updated annually)
5. Strategies for achieving the objectives
6. Current and projected financial resources that provide a basis for initiatives specified in the strategic plan
7. Strategies for evaluating progress toward achieving the objectives (Objectives 4-1 through 4-3)
8. The faculty, administration, and institutional advisory committee annually review the strategic plan and the institution’s progress toward meeting its stated objectives (and revise as necessary). (Objective 4-4)

# STANDARD FIVE

## Learning Resources

### Objectives of Accreditation Related to “Learning Resources”

1. To verify the presence and adequate maintenance of learning resources appropriate and essential for the achievement of the objectives for each program offered
2. To verify that the learning resources are readily available and used by students and faculty
3. To verify that all learning resources meet applicable safety standards

### Criteria of Accreditation Related to “Learning Resources”

#### **A. Media Services**

1. The institution has a written plan for its media services, which is appropriate for and inclusive of all methods of program delivery.  
[See Section VII. Definitions - Plan.] (Objectives 5-1 and 5-2)

The institution’s written plan for media services includes the following components:

2. The scope and availability of the services
3. A variety of current and relevant educational materials, such as reference books; periodicals and manuals of a business, professional, technical, and industrial nature; audio-visual materials and equipment; internet access to sites with educational and reference materials appropriate to program offerings; and other materials to support its educational programs
4. The administrative, supervisory, or instructional staff person responsible for the implementation and coordination of media services
5. Roles and responsibilities of designated staff member(s)
6. Orientation for user groups (i.e., faculty, students, and others, if needed)
7. Facilities and technical infrastructure essential for using media materials
8. Annual budgetary support for the services
9. Annual evaluation of the effectiveness of media services and utilization of the results to modify and improve media services  
(Objectives 5-1 and 5-2)
10. Media services, including instructional supplies, physical resources, technology, and fiscal resources, are available to support the programs offered by the institution.  
(Objective 5-2)
11. Media services are available to ensure the achievement of desired student learning and program objectives. (Objectives 5-1 and 5-2)
12. A current inventory of media resources is maintained. (Objective 5-1)
13. Provisions made for the repair, maintenance, and replacement of media equipment and supplies are in place. (Objective 5-1)

14. The institution provides print and non-print instructional media resources to support students and faculty in meeting program objectives. (Objective 5-2)
15. The institution's learning resources, including media services, technology, facilities, and materials, are comprehensive, current, selected with faculty input, and accessible to the faculty and students. (Objective 5-2)

## **B. Instructional Equipment**

1. The institution has an inventory procedure to account for instructional equipment. [See Section VII. Definitions - Equipment Inventory.] (Objective 5-1)
2. The institution has a procedure for emergency purchases to ensure the acquisition and repair of equipment within a reasonable period of time to support continuous instruction. (Objective 5-1)
3. Relevant and up-to-date equipment is available to support the programs offered by the institution. (Objectives 5-1 and 5-2)
4. The institution has a written **procedure** for maintaining equipment and for replacing or disposing of obsolete equipment. [See Section VII. Definitions - Procedure.] (Objectives 5-1 and 5-2)
5. Instructional equipment meets appropriate and required safety standards. (Objective 5-3)

## **C. Instructional Supplies**

1. Instructional supplies are available to support the programs offered by the institution. (Objective 5-1)
2. The institution has a procedure for purchasing and storing instructional supplies. (Objective 5-1)
3. Funds are budgeted to provide supplies at a level that supports quality occupational education. (Objective 5-2)
4. The institution has a procedure for emergency purchases of instructional supplies within a reasonable period of time to support continuous instruction. (Objective 5-2)
5. Instructional supplies meet appropriate and required safety standards. (Objective 5-3)



## **STANDARD SIX**

### **Physical Resources and Technical Infrastructure**

#### **Objectives of Accreditation Related to “Physical Resources and Technical Infrastructure”**

1. To verify the presence and adequate maintenance of physical resources and technical infrastructure essential for institutional operations and achievement of the objectives for each program offered
2. To ensure that the physical resources provide for the protection of the health and safety of students, faculty, administrative staff, and visitors
3. To ensure that the institution’s technical infrastructure provides for the privacy, safety, and security of data contained within it
4. To ensure that the institution’s technical infrastructure provides for the reliable accessibility and backup of data contained within it

#### **Criteria of Accreditation Related to “Physical Resources and Technical Infrastructure”**

1. A plan that addresses the adequacy and improvement of physical facilities and technical infrastructure has been developed, is maintained, and includes, if applicable, distance education infrastructure. [See Section VII. Definitions - Plan.] (Objectives 6-1 and 6-2)
2. The technology used by the institution to deliver services and, if applicable, program content to students meets the needs of the students without creating barriers to student support or learning. (Objective 6-1)
3. A plan for the ongoing operation and maintenance of physical facilities, technical infrastructure, and, if applicable, distance education infrastructure, has been developed and is in use. [See Section VII. Definitions - Plan.] (Objectives 6-1 and 6-2)

The operation and maintenance plan addresses the following elements:

4. Personnel
  5. Equipment and supplies
  6. Relevant state law
  7. Applicable federal codes and procedures
  8. Availability of the plan to employees and students
  9. Annual evaluation of the plan (and revised as necessary)  
(Objectives 6-1 and 6-2)
10. Physical facilities at all locations provide adequate, safe, and clean facilities with appropriate supporting utilities for classrooms, laboratories/shops, offices, restrooms, lounges, meeting rooms, parking, etc. (Objective 6-2)
  11. A written plan for assuring the health and safety of the institution’s employees, students, and guests to maintain readiness is in use and includes procedures for reporting and investigating incidents affecting the health and safety of the institution’s constituents. [See Section VII. Definitions - Plan and Real, Threatened, or Impending Danger.] (Objective 6-2)

## The health and safety plan

12. has been distributed to employees,
  13. is evaluated annually with input from employees (and revised as necessary), and
  14. ensures basic information about the plan is available to students.  
(Objective 6-2)
15. First aid supplies are readily available. (Objective 6-2)
16. A plan for the protection of the institution's technical infrastructure is in use and
17. ensures the privacy, safety, and security of data contained within institutional networks;
  18. ensures computer system and network reliability whether provided directly by the institution or through contractual arrangements;
  19. ensures emergency backups for all technical services whether provided directly by the institution or through contractual arrangements;
  20. is evaluated annually (and revised as necessary); and
  21. ensures basic information about the plan is available to the administration, faculty, and staff.  
[See Section VII. Definitions - Plan.] (Objectives 6-3 and 6-4)
22. Preserving and protecting student coursework, testing, and records are provided by the use of storage devices, duplicate physical or digital records, security files, or other measures that ensure both the preservation and security of the records from fire, theft, vandalism, and other adverse actions. (Objectives 6-3 and 6-4)

# STANDARD SEVEN

## Financial Resources

### **Objectives of Accreditation Related to “Financial Resources”**

1. To verify that the institution has the necessary financial resources to achieve the objectives of its programs and services
2. To verify that the institution has the financial stability to enable it to continue to meet financial obligations and achieve its objectives
3. To verify that revenues and expenditures are capably managed and accurately documented
4. To verify that the institution complies with applicable refund policies for tuition, fees, and other institutional charges

### **Criteria of Accreditation Related to “Financial Resources”**

1. A qualified financial officer or department oversees the financial and business operations of the institution. (Objectives 7-1 and 7-2)
2. Financial records are maintained so that the institution’s fiscal position can be analyzed in a timely manner. (Objectives 7-1 and 7-2)
3. The institution demonstrates responsible financial management with funds sufficient to maintain quality educational programs and to complete the education of students enrolled. (Objectives 7-1 and 7-2)
4. The institution uses adequate auditing and budgetary controls and procedures consistent with local, state, and federal requirements. (Objectives 7-1 and 7-2)
5. The institution exercises proper management, financial controls, and business practices. (Objectives 7-1, 7-2, and 7-3)
6. Persons handling institutional funds or revenues from any source are bonded or covered under an employee-dishonesty insurance policy. (Objective 7-2)
7. Financial aid programs utilizing public and/or private funds are capably administered and accurately documented. (Objective 7-3)
8. Qualified personnel are responsible for proper financial record-keeping, reporting, and auditing. (Objective 7-4)
9. The institution has reported all contingent liabilities in a timely manner. [See Section VII. Definitions - Contingent Liability.] (Objective 7-3)
10. The institution has submitted notices and copies of all lawsuits filed against the institution within five (5) days of being served. (Objective 7-3)

11. The institution maintains compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements, including compliance with default management and audit benchmarks. (Objective 7-3)
12. The institution utilizes a written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with available lenders. (Objective 7-3)
13. The institution informs students of their ethical responsibilities regarding financial assistance. (Objective 7-3)

#### **Special Financial Stability Requirement for Public Institutions (Item 14)**

14. The institution identifies sources of funds and revenues and shows evidence of fiscal stability. (Objectives 7-1 and 7-2)

#### **Special Financial Stability Requirements for Non-Public Institutions (Items 15 - 17)**

15. To document financial stability, the institution submits financial information required by the Council as described in the *Handbook of Accreditation*. [See Section VII. Definitions - Audited Financial Statement.] For initial accreditation, non-public institutions **must** submit audited financial statements for the two most recent fiscal years that include composite score worksheets prepared by an independent CPA. The first of those two years may be the audited financial statement submitted with the institution's candidacy application and the second audited financial statement **must** represent activity while the institution is in candidate status. Restated/revised audited financial statements will not be accepted without third-party certification. (Objectives 7-1 and 7-2)

The institution demonstrates financial stability through submission of the most recent audited financial statement that reflects

16. a minimum, unrounded composite score of 1.5 for the two most recent fiscal years as disclosed on a composite score worksheet included in the audit report; and
  17. no condition or event which could potentially affect the institution's ability to continue operation, including but not limited to, contingent liabilities, ongoing litigation, or the financial stability of a parent corporation.
- (Objective 7-2)

#### **Refund Policy**

18. The institution has a fair and equitable refund policy for the refund of tuition, fees, and other institutional charges in the event the institution cancels a class or if a student does not enter or does not complete the period of enrollment for which they have been charged. (Objective 7-4)

The following elements are present and indicative of a fair and equitable refund policy:

19. The institution's refund policy is included in official publications and uniformly administered.
20. Refunds, when due, are made without requiring a request from the student.

21. Refunds, when due, are made within 45 days (1) of the last day of attendance if written notification has been provided to the institution by the student, or (2) from the date the institution terminates the student or determines withdrawal by the student.
  22. Retention of tuition and fees collected in advance for a student who does not commence class does not exceed \$100.
  23. The institution complies with the refund policies adopted by the Commission unless a non-public institution's licensing agency or a public institution's governing board mandates the use of a different policy.
- (Objective 7-4)

(See *Policies and Rules of the Commission*, Refund Policy.)

# STANDARD EIGHT

## Human Resources

### Objectives of Accreditation Related to “Human Resources”

#### **A. General**

1. To verify that accurate and current job descriptions are available for all employee positions
2. To verify that complaint/grievance procedures for employees are published, maintained, and followed equitably
3. To verify that procedures for evaluating the effectiveness of employees are published, maintained, and followed equitably
4. To verify that orientation procedures for employees are maintained and followed equitably and that all employees have access to current copies of institutional policies

#### **B. Faculty**

1. To ensure that the number of faculty is sufficient to fulfill the mission and operate the programs of the institution
2. To verify that the faculty, including adjuncts, are and remain well prepared by virtue of education and experience to perform the duties assigned to them including teaching at a distance where applicable
3. To verify that, in addition to teaching, faculty are involved in curriculum development, student advisement, work with business and industry, and planned programs of professional development to remain current in their teaching fields

#### **C. Administrative and Supervisory Personnel**

1. To ensure that the number of administrative and supervisory personnel is sufficient to fulfill the mission and operate the programs of the institution
2. To verify that administrative and supervisory personnel are and remain well prepared by virtue of education and experience to perform the duties assigned to them

#### **D. Instructional Support Staff**

1. To ensure that the number of instructional support staff is sufficient to fulfill the mission and operate the programs of the institution
2. To verify that instructional support staff are and remain well prepared by virtue of education and experience to perform the duties assigned to them

## E. Non-Instructional Support Staff/Services

To verify there are adequate non-instructional support staff and services provided by qualified personnel or contracted services to support the institution's mission

### Criteria of Accreditation Related to "Human Resources"

#### A. General

1. Duties and responsibilities of each position are specified in written job descriptions made available to administrators, faculty, and staff of the institution. (Objective 8-A-1)
2. The institution has published and implemented procedures for handling complaints/grievances from faculty and staff that are consistent with the policies of the institution's governing board including complaints/grievances filed against the institution's chief administrator, if any. (Objective 8-A-2)
3. Procedures are in place for the continuous evaluation of the performance and effectiveness of full- and part-time employees, with at least an annual written review and evaluation. (Objective 8-A-3)
4. Orientation procedures for all employees are maintained and followed equitably. (Objective 8-A-4)

#### B. Faculty

1. The institution has a sufficient number of faculty members to fulfill its mission and operate its programs. (Objective 8-B-1)

Each faculty member possesses

2. at least a high school diploma (or equivalent),
3. expertise in the area of responsibility that is actively maintained, and
4. additional requirements established for faculty members by the institution's governing board and/or state regulatory agencies. (Objective 8-B-2)
5. Faculty members who teach general education courses in associate degree programs hold a minimum of a bachelor's degree with 15 semester hours or 23 quarter hours in the teaching discipline with a grade of at least a 'C' in these courses. (Objective 8-B-2)
6. Faculty members who teach technical courses in associate degree programs have a minimum of an associate degree in an area that is related to the technical courses they teach. (In exceptional cases, evidence of documented work experience and skills in the technical field may be considered instead of formal academic requirements.) (Objective 8-B-2)
7. **For all coursework delivered via distance education or hybrid:** Faculty delivering instruction in a distance education or hybrid format are employees of the institution. (Objective 8-B-2)

8. **For all coursework delivered via distance education or hybrid:** The institution provides training for faculty who use technology in distance education or hybrid courses and programs. (Objective 8-B-2)
9. The institution plans, provides, supports, and annually documents professional growth opportunities for and participation by all faculty members. (Objective 8-B-2 and 8-B-3)
10. Each full-time and part-time faculty member responsible for delivering instruction on a regular and ongoing basis in a technical field maintains contact with employers in the technical field to stay current with industry trends in addition to any occupational advisory committee involvement. (Objective 8-B-3)

**C. Administrative and Supervisory Personnel**

1. The institution has a sufficient number of administrative and supervisory personnel to fulfill its mission and to oversee the operation of its programs and services. (Objective 8-C-1)
2. Administrative and supervisory personnel possess postsecondary education credentials and/or experience and demonstrated competencies appropriate to their areas of responsibility. (Objective 8-C-2)

**D. Instructional Support Staff**

1. The institution has a sufficient number of instructional support staff members to fulfill its mission and deliver its programs. (Objective 8-D-1)
2. Personnel are employed to maintain student and financial records; to assist in producing instructional materials; and to prepare correspondence, reports, and other documents as needed. (Objective 8-D-1)
3. Instructional support staff possess education credentials and/or experience and demonstrated competencies appropriate to their areas of responsibility. (Objective 8-D-2)

**E. Non-Instructional Support Staff/Services**

1. Custodial services are available to provide routine care and maintenance of facilities and grounds for the institution. (Objective 8-E)
2. Preventative maintenance services ensure continued operation of the facilities. (Objective 8-E)



# STANDARD NINE

## Organizational Structure

### Objectives of Accreditation Related to “Organizational Structure”

1. To ensure that the institution has a **legally** constituted governing body with authority and responsibility for the institution’s operations
2. To ensure that the governing body designates a chief administrator responsible for the institution’s operations
3. To ensure that the institutional structure promotes effective and efficient operation of the educational programs and non-educational services to students

### Criteria of Accreditation Related to “Organizational Structure”

1. The institution has a **legally** constituted governing body or board **with** authority and responsibility for the institution’s operation and control. (Objective 9-1)
2. If applicable, the non-public institution has **possession of** the current valid original document(s), typically a license, required to operate as an occupational education institution within the state where it is located. (Objective 9-1)
3. The chief administrator is responsible for the institution’s **postsecondary** operations and has the authority to implement the governing body’s **postsecondary** policies. (Objective 9-2)
4. The **institution has designated** a chief administrator **responsible for accreditation who is the person** of record for all purposes of the Commission, is a full-time staff member of the institution, has his/her office on the main campus, and is the Commission’s point of contact for all locations of the institution. (Objective 9-2)
5. An organizational chart is available to show the functional relationships among the personnel of the institution that **promote the effective operation of educational programs and institutional services for students**. (Objective 9-3)

# **STANDARD TEN**

## **Student Services and Activities**

### **Objectives of Accreditation Related to “Student Services and Activities”**

1. To ensure that adequate and appropriate student services are available to support the mission and programs of the institution. These services include the following activities:
  - a. Academic advisement
  - b. Counseling
  - c. Financial assistance
  - d. Orientation
  - e. Retention
  - f. Grievances
  - g. Records
  - h. Admissions
  - i. Others as appropriate to the institution
2. To ensure that the institution provides placement services for all program completers and conducts follow-up studies of completers and employers of completers

### **Criteria of Accreditation Related to “Student Services and Activities”**

1. The institution provides academic advisement services to assist students in planning for the occupational education programs they seek to pursue. (Objective 10-1-a)
2. Tests or other means of assessing the achievement and aptitudes of students for various occupations are appropriate and are used to provide personalized counseling and program admissions services to students. (Objective 10-1-b)
3. If the institution has processed Title IV loans or is currently processing Title IV loans, it has a default management plan that meets the requirements of the Commission for as long as required by the U.S. Department of Education. [See Section VII. Definitions - Plan.] (Objective 10-1-c)
4. There is a student orientation program to acquaint new students with policies, functions, and personnel of the institution. (Objective 10-1-d)
5. The institution has a written plan for addressing retention of students. [See Section VII. Definitions - Plan.]

The institution's student retention plan

6. includes input from faculty and students,
7. is evaluated on an annual basis (and revised as necessary), and
8. addresses how results are shared with faculty and staff. (Objective 10-1-e)
9. The institution has published and implemented grievance policies for handling complaints from students. (Objective 10-1-f)

10. The institution includes the Commission's mailing address, telephone number, and website address within the grievance policy in case the grievance cannot be resolved at the institutional level. (Objective 10-1-f)
11. Institutional records reflect that program complaints and grievances receive due process and include evidence of resolution. (Objective 10-1-f)
12. The institution maintains records on student complaints that are filed in accordance with the institution's grievance policy to ensure acceptable quality in the educational programs offered by the institution. (Objective 10-1-f)
13. A designated staff member is responsible for maintaining official files and records of students. (Objective 10-1-g)
14. Written procedures are established for access to student coursework, testing, and records to ensure confidentiality, limiting access to authorized personnel only. (Objective 10-1-g)
15. Student records, including enrollment, financial, academic, and current educational progress, as well as program completion, program placement and, if applicable, licensure exam pass rate status, are available at the institution. (Objective 10-1-g)
16. The institution, upon request by students, provides transcripts or procedures for obtaining transcripts containing, at a minimum, the following information: the program of study, courses or units of study completed with corresponding grades, and period of enrollment. (Objective 10-1-g)

Policies and procedures used for admission to programs must demonstrate relevance to students' abilities to complete the educational programs offered regardless of the method of delivery. In order to achieve this objective, candidate and accredited institutions must document compliance with the following requirements related to student admissions:

17. Admissions policies and procedures are clearly stated, consistently applied, non-discriminatory, published, and consistently communicated to students.
18. Admission requirements offer reasonable expectations for successful completion of the occupational programs offered by the institution regardless of the method of delivery.
19. **If applicable:** Institutions that admit students by exception to standard admission policies and procedures
  - a. have written admissions policies and procedures for these exceptions,
  - b. apply them uniformly,
  - c. provide documented evidence on how they are used, and
  - d. evaluate the effectiveness of the procedures used in admitting students by exception on an annual basis.
20. **If applicable:** For students admitted to a Vocational English-As-A-Second Language program, the institution utilizes written admission procedures that comply with Policies established by the Commission.
21. **If applicable:** Students admitted into associate degree programs have documentation of a high school diploma or its equivalent. (Objective 10-1-h)
22. The institution is responsible for any reasonable accommodation of students who are identified to have special needs. (Objective 10-1-i)

23. The institution provides placement services for all program completers. (Objective 10-2)
24. The institution demonstrates that it is following a written plan for placement services that includes the following elements:
  25. Identification of responsibilities for coordination of placement services
  26. A communications network that exists between the person responsible for placement coordination, the staff, the faculty, and various businesses and industries of the service area
  27. A list of employers and employment opportunities
  28. Counseling of students
  29. Maintenance of placement records for completers as a means of measuring the success of the institution in achieving its mission
  30. Evaluation on an annual basis (and revised as necessary)
  31. A description of how evaluation results are shared with faculty and staff and used for continuous improvement[See Section VII. Definitions - Plan.] (Objective 10-2)
32. The institution has a written plan for determining the effectiveness of student services, and ensures that the plan
  33. identifies responsibilities for coordination of student services,
  34. provides for the counseling of students,
  35. is evaluated on an annual basis, and
  36. addresses how evaluation results are shared with faculty and staff and used for continuous improvement.[See Section VII. Definitions - Plan.] (Objective 10-2)

# SECTION VII

## Definitions

**Accreditation**—A process by which quality is certified. As applied by the Commission, a self-regulatory process by which the Commission recognizes educational institutions that have been found to meet or exceed stated Standards applicable to occupational education institutions and/or programs (quality-assessment).

**Administration**—The professional staff who provide formal leadership in an institution. The institutional administrative staff includes the chief administrator and other personnel who perform the administrative functions defined by institutional policy.

**Administrator**—A full- or part-time employee of an institution to whom has been given the responsibility of coordinating operational and/or instructional activities of the institution.

**Admission**—The process through which a student is enrolled in an institution and/or placed into a program.

**Adverse Action**—An action taken by the Commission or Appeal Board to deny, withdraw, suspend, revoke, or terminate candidacy or accreditation.

**Annual/Annually**—Occurring once per calendar year (January through December).

**Associate Degree**—As defined in the U.S. Secretary of Education's scope of recognition for the Council, the term 'associate degree' refers to an 'applied' program with a credential awarded upon completion that is designed to lead the individual directly to employment in a specific career. The sole focus of associate degree programs accredited by the Council must not be described as transferability to a program offering a bachelor's degree. Although the objective of this degree is to enhance employment opportunities, some bachelors' degree institutions have developed upper-division programs to recognize this degree for transfer purposes, and this trend is to be encouraged when appropriate. When articulation agreements with four-year institutions do exist, those opportunities may be described in appropriate publications. However, institutions approved to offer applied associate degree programs by the Council must take care not to guarantee the transferability of credit to other institutions by way of the title of the programs or the descriptions of the programs.

**Audited Financial Statement**—The result of an official financial examination performed by an independent certified public accountant in accordance with Generally Accepted Accounting Principles (GAAP) and Generally Accepted Government Auditing Standards (GAGAS). In order to document compliance with Council Policies and Standards, audited financial statements must include, at a minimum, the following information:

1. Accountant's report
2. Balance sheet
3. Income statement
4. Statement of cash flow
5. Composite score (unrounded) as disclosed on a composite score worksheet included in the audit report using the formula approved by the U.S. Department of Education prepared by an independent CPA
6. Appropriate footnotes to the financial statements and other relevant disclosures
7. The name, licensing number, and licensing state of the CPA or firm responsible for preparing the audited financial statement

(Procedural Note: Audited financial statements must be accompanied by a COE Financial Questionnaire.)

**Benchmark**—A standard of excellence or achievement against which similar things must be measured or judged. (Benchmarks for minimally-acceptable percentages of completion, placement, and licensure exam pass rates can be found within the Council’s annual report software and on the Council’s website – [www.council.org](http://www.council.org).)

**Budget**—A financial plan that contains sufficient major categories of anticipated expenditures and expenses for a specific fiscal period based on a projected amount of funds and revenues.

**Candidacy/Candidate for Accreditation [Pre-accreditation]**—A status granted to an institution that has demonstrated compliance with specified eligibility requirements that define the universe of entities that may seek accreditation by the Commission.

**Career Development**—Professional development and skill enhancements necessary for individual growth and lifelong learning.

**Certification**—Credentials that enhance employability, but are not necessarily required for employment in specific occupational positions (e.g., software certifications for programmers: MSE certification, A+ Certification, etc.).

**Chief Administrator**—The administrative head of a **postsecondary** institution to whom has been delegated major responsibility for the direction, operation, and coordination of the institution’s **postsecondary** programs and activities. The chief administrator must be a full-time employee of the institution and must maintain his/her office on-site at the main campus. This is the person who will be the Commission’s point of contact for all campuses of the institution. The administrative head in a military institution is a senior military officer or civilian employee.

**CLEP (College-Level Examination Program)** – A set of standardized tests in various subjects, qualifying scores on which can be used to earn college credits.

**Clinical Instruction**—Supervised instruction involving or concerned with the direct observation and treatment of patients.

**Clock Hour**—A period of 60 minutes with a minimum of 50 minutes of instruction.

**Co-Location**—An arrangement between two legally separate educational institutions in which administration, faculty, staff, websites, links to websites, telephone numbers, and/or physical facilities may be shared. (This arrangement excludes the contracts between separate institutions that result in instructional service centers or other Commission-approved partnerships.)

**Commission**—The body of 19 elected members who serve as the governing board of the Council and its accreditation decision-making board.

**Community** – A group or groups comprised of institutional constituents/ stakeholders (i.e., students, staff, faculty, potential employers, governmental and other entities) who are served by or have an interest in the educational programs offered by an institution.

**Competencies**—The specialized knowledge, skills, and attitudes required for successful performance in a specific occupation.

**Competency Test**—A group of questions and/or tasks to which a student responds to produce a quantitative representation of the student’s knowledge, skill, and/or performance in a specific occupational area.

**Completer**—A student who has demonstrated the competencies required for a program and has been awarded the appropriate credential (graduate completer) or has acquired sufficient competencies through a program to become employed in the field of education pursued or a related field as evidenced by such employment (non-graduate completer).

**Condition**—A process, status, or situation adopted by the Council with which an institution must comply to become and maintain status as a candidate for accreditation or an accredited institution.

**Constituency**—The persons and, if applicable, entities that they represent who are to be served by an institution through one or more of its educational programs.

**Contingent Liability**—A potential liability that may exist in the future depending on the outcome of a past event (i.e., adverse tax court decisions, lawsuits, letter of credit required by the U.S. Department of Education, etc.). In audited financial statements, footnote disclosure is required of the circumstances for potential loss.

**Continuing Occupational Education**—Educational activities or experiences designed to assist in the development of knowledge and skills with the goal of maintaining one’s current professional occupation (as opposed to advancing one’s career). Participants in continuing education are assumed to have previously attained a basic level of education, training, or experience in the occupational area in which they are enrolling. These activities are not included in the institutional Self-Study Report, FTE calculation, or student achievement data collection, and are not required to be included on the COE approved program list. [See Section VII. Definitions - Job Upgrade Training.]

**Contractor (Vendor)**—A company or individual who provides goods and/or services to an institution for an agreed upon price. Contractors are not considered full-time employees for the purpose of meeting workshop attendance required by the Council’s accreditation processes.

**Correspondence Education** – Instruction delivered via email or traditional mail service and that employs print-based media, which may or may not be supplemented with video tape, CDROM, audio tape instruction/demonstrations, as well as online learning resources. Correspondence education requires minimal interaction between faculty and student. (The Council does not accredit correspondence education programs.)

**Council (on Occupational Education)**—The legal entity incorporated in the State of Georgia whose membership is all institutions accredited by the Commission.

**Course**— A series of lectures, laboratory, and/or work-based activities that pertain to a particular subject and that are typically required as part of a broader curriculum (e.g., a program).

**Credential**—A diploma, certificate, degree, or other official acknowledgment by an institution that a student has completed a program.

**Credit Hour (Federal Definition)**—Except as provided in 34 CFT 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.

**Criterion**—A characteristic of an institution that must be possessed or demonstrated as evidence of compliance with an accreditation Standard.

**Default Management Plan**—A written plan to address the institution’s management of default rates pertaining to Title IV funds. The plan must include appropriate procedures for

1. conducting entrance interviews with all borrowers,
2. distributing written information that addresses provisions of the student loan program,
3. counseling on the part of the institution to provide guidance in debt management,
4. notifying lenders and guarantee agency regarding a student’s change in status,
5. conducting exit interviews with students withdrawing or graduating from the institution,
6. communicating with the borrower during a grace period, and
7. conducting a systematic annual evaluation of its default management plan.

**Distance Education** — An educational delivery method that uses one or more technologies to provide instruction to students who are separated from **faculty** and support regular and substantive instruction between students and **faculty**, synchronously or asynchronously. Technologies used may include the internet, print-based media, email, one-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communications devices; audio conferencing; or video cassettes, DVD’s, and CD-ROMs, if the cassettes, DVD’s, or CD-ROMs are used in a course in conjunction with any of the technologies listed. Limitations specified under ‘Contractual Agreements/Contracts for Instruction’ apply to distance education delivery of instruction.

**Distance Education Program**—A program that makes available **100%** of its required instructional hours via distance education.

**Educational Quality**—Determined on the basis of (1) the appropriateness of institutional/program objectives and (2) the effectiveness with which the institution/program is utilizing its resources to achieve these objectives.

**Eligibility Requirements**—Requirements that define the kind of institution or program that an accrediting agency considers a part of its universe and thus within the scope of accrediting activities for which the agency assumes responsibility.

**Emergency Evacuation**—An emergency evacuation can include exiting the building in case of fire or moving to a safe place inside the facility in case of natural disasters.



**Employee**—An individual hired by an institution and paid compensation in the form of an hourly wage or annual salary. Employees of an institution are often eligible for additional benefits in the form of retirement, paid vacation and other leave days, various types of insurances, etc. Employment taxes for these persons are paid by the hiring institution. Equipment used for the performance of the employee’s duties is provided by the hiring institution.

**Employment Requirements**—The certifications or licensure that may be required to secure employment in a specific position or within an occupational area.

**Enrollee**—A person who is admitted to the institution and attends classes in pursuit of completing a program for a minimum time period as specified by institutional policy. (For purposes of measuring outcomes, an institution does not have to report a student as an enrollee if the institution refunds 100% of any tuition that the student may have paid).

**Equipment Inventory**—A detailed list of equipment including location, number of items, date of purchase, and purchase price and/or current value of each item. The list should include both instructional and non-instructional equipment.

**External Budgeting**—A budgeting process that occurs beyond the immediate control of the individual institution, and that generally addresses the overall requirements of a multi-institutional system.

**External Members (on Advisory Committees)**—Official members of an advisory committee who are not employees of the institution (staff, faculty, or administrators) or corporation, who have no relation to employees of the institution (e.g., family members), and who have no financial interest in the institution.

**Faculty**—Full- or part-time personnel of an institution who are responsible for providing instruction to students.

**Final Approval**—The second of two required approvals granted by the Commission for certain substantive changes upon the satisfactory completion of hosting a Council site visit (physical or virtual, in the case of distance education applications) and review by the Commission of all documentation related to the substantive change (the application, the site visit report, and the institution’s response to the site visit report – if applicable).

**Follow-Up**—The act of making formal contact to obtain specified factual and/or perceptual information from a person or group of persons.

**Full-Time Equivalent (FTE)**—A unit of measurement used by the Commission to define the amount of scheduled instruction that equates to one full-time student during one academic year. The Commission defines an FTE as 900 contact (clock) hours, 45 quarter credit hours, or 30 semester credit hours of scheduled instruction. The clock or credit hours used to calculate an institution’s FTE must reflect coursework in which a student has enrolled and matriculated. The FTE does not include hours or credits transferred from other institutions or awarded as CLEP courses. (In some cases, a Federal institution may use an “Average-on-Board (AOB)” measure in place of FTEs for computing dues.)

**Generally Accepted Accounting Principles (GAAP)**—Requirements established by the American Institute of Certified Public Accountants for use by auditors to prepare audited financial statements.

**Generally Accepted Government Auditing Standards (GAGAS)**—Requirements established by the federal government to be used by auditors and audit organizations when performing audits of government organizations, programs, activities, and functions and audits of government funds received by for-profit entities, non-profit organizations, and other non-government organizations.

**Goals of the COE Accreditation Process**—The significant values and major purposes to whose realization the efforts of individuals and groups are directed.

**Good Cause**—The Commission may grant an extension of time for compliance with any of the Conditions, Standards, Criteria, or procedures with good cause. Good cause may be demonstrated through submission of a clear and detailed explanation of extenuating circumstances that have prevented the institution from demonstrating compliance within the time frames specified by the Commission. Circumstances described may include, but are not limited to, economic conditions of the community served by the institution, personnel changes that have taken place within the institution, and natural disasters that have prevented timely compliance. The Commission will determine whether institutions have demonstrated good cause on a case-by-case basis. The Commission will take into consideration not only the extenuating circumstances described by the institution, but the institution's history of compliance with Conditions, Standards, Criteria, and procedures of the Commission, as well as the institution's standing with federal, state, and recognized accrediting agencies. The extension granted by the Commission will not exceed the length of the longest program.

**Governing Body or Board**—An appointed or elected group of individuals who are responsible for establishing policies of the institution in compliance with applicable regulatory statutes.

**Graduate**—A student who has demonstrated the competencies required for a program and has been awarded the appropriate credential by the institution.

**Guidelines**—Less prescriptive suggestions for operating or developing something.

**Hybrid Program**—A program that makes available less than 100% of its required instructional hours via distance education.

**Independent Certified Public Accountant**—A person who fulfills the following requirements: 1) has been certified by a state examining board as having fulfilled the requirements of state law pertaining to public accountants as evidenced by current credentials which attest to their certification AND 2) has no business or family relationship with a COE candidate or accredited institution, its board members, or its owners.

**Initial Approval**—The first of two required approvals granted by the Commission for certain substantive changes upon the satisfactory completion and review of the information provided in a substantive change application. After initial approval is granted, Commission staff schedule physical or virtual site visits within 180 days that are required before the second required approval of the change – Final Approval – is granted. Upon the granting of initial approval, institutions may begin full implementation of the change applied for and may be eligible for approval for student financial aid funding as applicable to the change.

**Institution**—A school, center, unit, or other provider of occupational education. An institution is a physical location (a bricks and mortar 'schoolhouse') where students, faculty, administrators, and other staff are present and where primary and supportive resources are available to instruct students in each course required of every approved program offered by the institution. This includes the

designation of physical areas (classrooms, lab areas, administrative and common areas) appropriate for meeting the needs of students, staff, faculty, and others present at the campus. Approvals for specific programs issued by state, federal, or other agencies are not synonymous with the Council's definition of an institution.

**Institutional Advisory Committee**—A group of at least three persons, a majority being external to the institution, who are knowledgeable of occupational education and employment needs of the community. Through regularly scheduled and documented meetings, the committee provides consultative assistance to the administration of the institution to ensure that the institution continually strives to meet the occupational education needs of the community.

**Instruction**—Planned activities directed by faculty for the purpose of enabling students to acquire specific knowledge, skills, and/or attitudes. Instruction may be provided through lectures, laboratory or clinical exercises, distance education, or planned work-based activities.

**Instructional Media**—Any print or non-print learning resources (e.g., books, manuals, periodicals, computer software, films, videotapes, audio tapes, slides, and others) and the equipment and services necessary to use them.

**Instructional Supplies**—Items needed for instruction.

**Instructional Support Staff**—Full- or part-time personnel who are responsible for those tasks which directly support the faculty.

**Integrity**—Wholeness or consistency between or among principles, intentions, and actions, and thus uprightness of character.

**Internal Budgeting**—A budgeting process that occurs primarily at the level of the individual institution and that addresses both instructional and non-instructional needs and daily operational requirements of the institution.

**Job Upgrade Training**— Educational activities or experiences that are designed to enhance existing knowledge and skills and that are offered with the goal of providing persons in specific occupations with the credentials, knowledge, and skills needed for career advancement (as opposed to maintaining one's current professional occupation position). These activities are considered to be occupational programs and are included in the institutional Self-Study Report, FTE calculation, and student achievement data collection (completion data only), and must be included on the COE approved program list. [See Section VII. Definitions - Continuing Occupational Education.]

**Laboratory Instruction**—An instructional setting under the supervision of institutional faculty in which students apply theories and principles learned during lectures in order to acquire the proficiency and dexterity that is required in the occupation for which the student is being prepared.

**Lecture**—Instruction by a qualified faculty member or other resource which imparts to students the concepts, principles, and theories of an academic or technical subject.

**Legal Authority**—The power derived by an individual or group to perform specific functions based on applicable local, state, and/or federal statutory regulations.

**Legal Responsibility**—The obligation and/or liability placed on an individual or group by applicable local, state, and/or federal statutory regulations.

**Licensure**—Credentials that are required for employment in specific occupational positions (such as Licensed Practical Nursing and Cosmetologist).

**Main Campus**—The lead (or parent) institutional campus is the location where the offices of the chief administrator and accreditation liaison officer are maintained and to which all non-main campus sites are subordinate and accountable. The main campus must offer at least one approved occupational program and must maintain duplicates of all student records for non-main campus sites.

**Merger**—Two or more accredited main campuses that merge into one campus; or, an accredited institution becoming a branch of another accredited institution.

**Mission of the Institution**—The end to be attained by an institution through the programs and services provided for its students. The mission of federal institutions shall be to instruct students to such competency levels that they are qualified to perform federal jobs.

**Non-Graduate Completer**—A student who left the institution without a credential but has acquired sufficient competencies through a program to become employed in the field of education pursued or a related field, as evidenced by such employment. [See Section VII Definitions - Completer and Graduate.]

**Non-Public Institution**—An institution that is created, operated, and controlled by a non-governmental entity, such as a business corporation, a foundation, a religious organization, or a chartered association.

**Objectives of COE Accreditation**—Explication in more specific terms of ideas and activities inherent in the aspects of the institution evaluated by the COE accreditation process, but not necessarily obvious or explicit in the goals of COE accreditation.

**Objectives of an Educational Program**—A statement that specifies the knowledge, skills, and/or attitudes to be acquired by students through planned instructional activities.

**Objectives of a Strategic Plan**—Objectives are specific in nature and consist of the following elements:

1. What will be accomplished
2. When it will be accomplished
3. Who is responsible for accomplishing it
4. How accomplishment will be measured

**Occupational Advisory Committee**—Occupational advisory committees, which are composed of at least three members external to the institution, must be appointed for each program taught by the institution. Their primary purpose is to ensure that desirable, relevant, and current practices of each occupation are being taught. An occupational advisory committee may also perform the functions of the institutional advisory committee if only one occupational advisory committee is required for the institution.

**Occupational Area**—A general term used to group programs of study that educate students in a variety of specific concentrations that are related to that term.

**Occupational Education Institution**—An education institution that has as its mission the preparation of individuals for employment and/or career enhancement. (The main campus or parent institution has a chief administrator to whom each branch, extension, or other type of separate site is subordinate and accountable. The institution recognizes individuals who acquire targeted knowledge, skills, attitudes, and other competencies by awarding appropriate credentials such as applied associate degrees, diplomas, certificates, and/or other acceptable credentials.)

**Occupational Education Program**—A sequence of instruction and related activities (e.g. laboratory activities and/or work-based activities) designed to provide educational and workplace competencies that lead to a credential. (Such programs offered by Commission-accredited institutions are designed to prepare individuals for job entry and/or career advancement. Test preparation activities do not qualify as occupational education programs.)

**Official Meeting**—A meeting is considered 'official' if it: a) is planned or called by the institution, b) requires the attendance of members, c) follows an agenda, and d) is recorded in official minutes.

**Operational Procedure**—Specific provisions that have been established by the institution to implement policies adopted by the governing board.

**Placement**—A completer of a program that (1) is employed in the field of education pursued or in a related field or (2) has received the appropriate credential and entered the military or continued his/her education. Valid employment in the field or a related field includes placement in a permanent full- or part-time position with an employer or employment agency, or self-employment in the field of education or a related field. Internships and externships, either paid or unpaid, do not qualify as placements.

**Plan**—A detailed written proposal/method for achieving an objective. The following elements must be included in a plan: scope of services, budgetary resources, major activities, evaluations of the plan, and stakeholders with whom the plan is shared.

**Policies**—A set of written statements providing the bounds within which all procedures, programs, goals, objectives, and activities of the institution are carried out. These are adopted by the governing board of an institution (or in military institutions, by higher military command headquarters) to ensure operations comply with statutory regulations and are consistent with the stated mission.

**Position**—An attitude or stance of an entity—the way a body (organization) looks at an issue or takes a stand on such. A mental or emotional stance adopted with respect to something.

**Pre-accreditation [Candidacy/Candidate for Accreditation]**—A status granted to an institution that has demonstrated compliance with specified eligibility requirements that define the universe of entities that may seek accreditation by the Commission.

**Procedure**—A formal or set order of operating or doing something—a method of conducting affairs.

**Process**—A series of progressive and independent steps by which an end is attained.

**Professional Growth**—Planned activities to increase the knowledge, skills, and/or abilities of professional personnel in areas related directly to job responsibilities.

**Pro Forma**—A financial statement that is calculated using an accountant's discretion. It does not follow GAAP or GAGAS. Rather, calculations are computed according to the estimated relevance of certain events/conditions experienced by the company. Items that are typically included/excluded from an audited financial statement using GAAP may be represented differently in a pro forma statement, depending on what the accountant feels accurately represents the company's actual performance. However, the Council requires that each pro forma statement submitted must include a balance sheet, an income statement, a cash flow statement, and notes and disclosures.

**Public Institution**—An institution that is created, operated, and controlled by a local, state, or federal governmental entity.

**Publications (e.g., the institution's website and other printed materials)**—A website and other official informational documents which are made available through various media (hard copy or online) to provide the information specified below that must be readily available to students, prospective students, and other constituents:

- a. The publication(s) must contain and accurately depict the following information:
  1. The institutional mission
  2. Admission requirements and procedures
  3. The institution's policy on the transfer of students between programs within the institution
  4. The institution's policy on the transfer of students from other institutions
  5. The institution's policy on the transfer of credits that includes a statement of the criteria established by the institution regarding the transfer of credit earned at another institution
  6. Basic information on programs and courses, with any required sequences and frequency of course offerings explicitly stated
  7. Program completion requirements, including length of time required to obtain certification of completion
  8. Faculty (full-time and part-time listed separately) with degrees held and the conferring institution
  9. A description of institutional facilities readily available for educational use
  10. Rules and regulations for conduct
  11. Tuition, fees, and other program costs
  12. Opportunities and requirements for financial aid
  13. Avocational programs/courses that are neither accredited by the Council, nor qualify students to receive Title IV financial aid (such as ESL programs)
  14. Policies, procedures, and time frame for refunding fees and charges to students who withdraw from enrollment
  15. National and/or state legal requirements for eligibility for licensure or entry into an occupation or profession for which education and training are offered
  16. Any unique requirements for career paths or for employment and advancement opportunities in the profession or occupation described
  17. The institution's grading system
  18. The institution's academic/school calendar
  19. The street address and telephone number of each campus of the institution (main campus and each additional permanent site)
  20. The institution's student grievance procedure which includes the Commission's mailing address, telephone number, and website address

- b. Other publications that make any reference to the institution's status (candidacy or accredited) with the Commission must be accurate and must include the name, address, telephone number, and website address of the Commission. (In lieu of reference to the Commission, the institution may use the following statement: "For information about national and program accreditation, contact the institution.")
- c. The website is readily and publicly available to students, prospective students, and other constituents to provide current information as specified below:
  1. The name of the institution exactly as approved by the Commission and the institution's authorizing agency
  2. The name, email address, and telephone number of the institution's Chief Administrator
  3. A list of programs that is consistent with those approved by the Commission and state/federal agencies
  4. Photos (if used) that accurately depict the institution's physical facilities and programs

**Real, Threatened, or Impending Danger**—Any situation which could cause injury to persons on the institution's campus, including but not limited to fires, tornadoes, floods, hurricanes, earthquakes, bomb threats, or violent acts by an individual.

**Registrant**—A person who registers for instruction with intent to attend.

**Related Field (Placement)**—Placement of graduate and non-graduate completers in a broader field of work that uses the knowledge and skills gained in the program of study regardless of whether the work title specifically references the program of study. Graduate completers who secure employment in a field that does not require the knowledge and skills gained in the program of study for securing that employment must be classified as placed in an 'unrelated' field. (Non-graduate completers, by definition, must secure employment in the field of study or a related field, employment that requires knowledge and skills gained in the program, or must be classified as withdrawals from the program of study.)

**Restated (Revised) Audit**—A financial statement that has been re-issued by an independent certified public accountant in order to correct data and/or disclosures from the first statement issued that were not accurately represented or to include data and/or disclosures that did not appear in the first statement. Restated audits submitted to the Commission must be clearly labeled as being restated, must provide a detailed list of data and/or disclosures that have been corrected and/or added since the last statement was submitted to the Commission, and must be prepared according to the guidelines of the American Institute of Certified Public Accountants. Restated audits must continue to meet the Commission requirements for audited financial statements found in Standard 7 – Financial Resources.

**Scope (change of)**—Any instance in which an institution departs significantly from its mission with regard to the occupational areas for which it offers preparation.

**Self-Paced Instruction** – An approach to instructional delivery where the student sets the pace of learning under the guidance and objectives set by **faculty**. Criteria for admissions/recruiting, program design, learning objectives, and instruction provided in any self-paced program must be consistent for every student enrolled. (See Criteria of Standard Two – Educational Programs.) In a self-paced program, it is a requirement that the student be given a maximum time parameter for completion of requirements for a specific course, series of courses, and/or the entire program, as established by the institution. Qualified faculty must be present as facilitators/resources for students as they proceed through mastering the various subject matters in courses required for program completion.

(See Criteria of Standard Eight – Human Resources.) Additionally, learning resources and student services and activities must be available to self-paced students as detailed in Standards Five and Ten. The length of self-paced programs as listed by the Commission must be shown in terms of average length of time expected for completion of program requirements, unless a state or federal authorizing agency mandates otherwise. (The Commission does not use the terms ‘self-paced instruction’ and ‘open-entry/open-exit scheduling’ interchangeably.)

**Service Area**—Service area is defined as the geographical area surrounding the institution from which the institution expects to attract students and serve employers.

**Staff**—The administrative, supervisory, faculty, and non-instructional personnel employed by an institution.

**Standard**—Generalizable conditions determined to be essential for objectives to be achieved.

**Strategic Planning**—A formalized, systematic process institutions use to develop forecasts or projections so as to identify future goals and create objectives for achieving those goals.

**Student**—A person who is formally engaged in learning as demonstrated by a commitment to attend class and pay tuition regardless of the source.

**Syllabus (Syllabi)**—An outline or other brief statement of the main points of the subjects of a course or lecture, the contents of a curriculum, etc.

**Technical Infrastructure**—The framework of an institution’s electronic student, financial, and IT information system inclusive of hardware and software that supports students, faculty, and staff services that guide institutional operations including the delivery of distance education as approved by the Council.

**Third-Party Audit Certification**—A certification process by which a Commission-selected independent certified public accountant thoroughly reviews all re-stated audited financial statements and other questionable statements submitted to the Commission for clarity, accuracy, and compliance with all Federal and Commission requirements governing the formal reporting of financial data.

**Traditional Program**—A program that requires all instructional hours to be completed on campus.

**Vision of the Institution**—A values-based description of a desired future for the institution that clarifies the institution’s image and how it should conduct itself as it fulfills its mission.

**Vocational English-As-A-Second-Language Program**—See current edition of the *Policies and Rules of the Commission*.

**Withdrawal**—A student who enrolled in an institution but withdrew before acquiring sufficient competencies for employment and before earning a credential in the field of education pursued or a related field.



**Work-Based Activities**—Structured learning activities conducted in supervised work settings external to the institution or a program, or in a setting that involves the public (e.g., clients who are served by the institution in cosmetology clinical or automotive technology settings) that are components of educational programs (e.g., externships, internships, clinical experiences, industrial cooperative education, and similar activities). Work-based activities may also include structured learning activities that occur outside of the classroom. These activities must be planned with at least two objectives:

1. To provide students with the opportunity to develop and apply a ‘real-world’ work experience using the knowledge and skills they attained in their program of study
2. To provide the institution with objective input from potential employers or customers of program graduates

**Workplace Ethics**—Commonly-accepted values, moral principles, and standards of a workplace, industry, or occupation.

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# INDEX

Academic Advisement .....	80	Bonds		Commission	
Accreditation		Litigation.....	22	Actions .....	17
Annual Renewal of .....	11, 16, 28	for Persons Handling Funds.....	73	Appearance before the .....	20
Candidate for... ..	5, 7, 9, 10, 13, 18,	Branch		Definition of.....	84
.....	25, 26, 27, 28, 30, 50, 51, 84	Annual Dues.....	28	History.....	3
Definition of.....	83	Converting to Main Campus.....	35,40	Possible Decisions .....	17
Dropped from.....	12, 17, 21, 29, 31	Definition of.....	39	Requirements Applicable to.....	51
Dual.....	50	Ownership .....	10	Communications, Official .....	23
Eligibility Requirements .....		Budget .....	73, 84	Competencies .....	46,56,58,60,61,62,66,84
.....	5, 10, 12, 30, 86	External .....	87	Competency Test.....	60, 61, 85
Federal Requirements .....	8, 49	Internal .....	89	Complaints .....	17, 49, 53, 77, 80, 81
File .....	24	Candidate Academy ....	8, 10, 12, 15, 26	Compliance (Time Period For)	
Liaison Officer ..	12, 15, 23, 47, 90	Candidate for Accreditation		.....	18-19, 20, 37, 51
Non-Main Campus		Annual Renewal.....	10	Completer.....	47, 59, 66, 80, 82, 85
Sites.....	8, 28, 33, 35, 38, 42	Award of.....	9	Completion Rate .....	66
Process .....	4, 12, 15	Eligibility Requirements .....	7	Comprehensive Review (for	
Reaffirmation ...	11, 12, 13, 17, 20,	Federal Requirements .....	49	Continued Accreditation).....	30
.....	24, 25, 28, 30	Definition of.....	84	Condition.....	85
Role and Value of.....	1	Meaning of.....	7	Confidentiality of Materials .....	24
Seal.....	25	Career Development .....	84	Constituency .....	50, 57, 71, 84, 85
Standards.....	55	Catalog		Consultants, Use of... ..	12, 15, 16, 30, 35
Withdrawal (Voluntary) .....	26	Accreditation Seal .....	25	Contingent Liability.....	85
Additional Space.....	40	Contents of (Publications).....	92	Continuing Occupational Education .....	85
Administrative and Supervisory		For Branches .....	39	Contractor .....	85
Personnel.....	76	Publication of Status .....	24	Contractual Agreements.....	35, 47
Administrative Obligations .....	23	Change(s)		Correspondence Education	
Admissions.....	80, 81	Branch to Main Campus .....	35, 40	Definition .....	85
Adverse Action.....	19, 33, 51, 52, 83	Fees for.....	35-36	Eligibility Requirements .....	8
Advertising.....	47	Location .....	35, 42	Cost of Institutional Evaluations.....	28
Advisory Committee		Mailing Address .....	37	Council (on Occupational	
Institutional .....	56, 68, 89	Main/Branch Relationship ...	35,42	Education).....	1, 3, 85
Occupational .....		Merger.....	35, 42, 90	Counseling	
.....	50, 56, 57, 59, 60, 78, 90	On-site Chief Administrator		Academic .....	74, 80, 82
External Members.....	56, 60, 87	.....	23, 37, 84	Default Management.....	86
Affiliation		Ownership or Control ..	33, 35, 41	Financial.....	74
Obligations of.....	23	.....Partial .....	35	Course .....	85
with COE .....	7	Program		Credential.....	85
Annual Dues.....	26-29	Change in Existing.....	36	Credit Hour Measurement.....	59
Annual Reports .....	10, 11, 13, 16-17,	Clock/Credit Hours .....	36	Credit Hour (Federal Definition) .....	86
.....	24, 29, 30, 45	Degree .....	36, 38	Criteria/Criterion	
Appealable Actions .....	21	Distance Education .....	36	Definition of.....	86
Appearance Before the		New .....	36	for Accreditation .....	55-82
Commission .....	20	Scope (Change of).....	36, 93	Debarment.....	29
Application for		Substantive and Other Changes	31	Default Management Plan.....	74, 80, 86
Candidacy .....	9, 13	Chief Administrator .....	23, 37, 84	Definitions.....	83
Substantive Changes (Chart).....	35-36	CLEP (College-Level Examination		Degree-Granting (Applied Associate	
Associate Degree Programs, General		Program) .....	7, 28, 84	Degrees) .....	38, 83
.....	7, 8, 35, 38, 57, 59, 77, 81, 83	Clinical Instruction.....	84	Deposits	
Associate Degree Programs, Nursing		Clock/Credit Hour Measurement.....	59	for Appeal Board Hearings ..	21, 28
.....	58, 62	Clock Hour Definition.....	84	for Site Visits.....	28
Audited Financial Statements		Closure .....	37, 43	Disagreements, Resolution .....	22
General .....	10, 17, 24, 74, 83	Co-Location .....	10, 84	(see also Complaints)	
Restated/Revised.....	74, 93	COE		Distance Education	
Benchmarks (for Completion, Place-		Affiliation with.....	7	Delivery Method .....	36, 86
ment, and Licensure).....	10, 66-67, 84	Publication of Status With .....	24	Program.....	58, 61, 86

Dropped from	Independent Certified Public	Occupational Education Program
Accreditation..... 12, 17, 19-20, 29	Accountant (CPA).....88	.....91
Candidate Status.....9	Infrastructure (Technical).....71	Official Communications .....23
Dual Accreditation .....50	Initial Accreditation (Eligibility).....10	Official Meeting .....91
Dues for Accredited Institutions . 26-28	Initial Approval .....88	Operational Procedure .....91
Dues for Candidates ..... 26-28	Innovation .....4, 6	Organizational Structure-
Educational Programs-Standard 2.....57	Institution .....88	Standard 9 .....79
Educational Quality .....86	Institutional Advisory	Orientation Procedures
Eligibility Requirements	Committee.....56, 89	Employee .....76, 77
Definition of.....86	Institutional Ethics and Integrity.....29	Student .....80
for Accredited Institutions.....10	Institutional Mission-Standard 1.....56	Outcomes
for Candidates .....7	Institutional Response Report.....16	Program - Standard 3 .....66
Maintaining.....30	Instructional Activities .....58	Payment of Dues and Fees .....26
Emergency Evacuation .....86	Instructional Equipment.....70	Penalties .....29
Employee .....87	Instructional Media .....69, 89	Physical Resources and Technical
English-as-a-Second-Language	Instructional Service Center.....40	Infrastructure-Standard 6 .....71
Programs (ESL) .....81, 94	Instructional Supplies.....70, 89	Placement.....66, 91
Enrollee .....87	Instructional Support Staff ....76, 78, 89	Plan .....91
Equipment .....69-70	Integrity.....29, 89	Planned Substantive Changes .....31
Equipment Inventory .....70, 87	Internal Budgeting .....89	Policies .....91
Ethics and Integrity .....29	Inventory	Position .....91
Evaluation of Standards .....50	Equipment .....70, 87	Pre-accreditation (Candidacy) .....7, 91
Extended Classroom .....40	Media Services..... 69-70	Probation .....19
Extension Campus .....39	Job Upgrade Training.....89	Procedure .....91
External Budgeting .....87	Laboratory Instruction .....89	Process .....91
Externships (see Work-Based Activities)	Learning Resources-Standard 5 .....69	Professional Growth.....78, 91
Facilities	Lecture .....89	Pro Forma.....92
Learning Resources (ST 5) .....69	Legal Authority .....89	Programs .....57
Physical Resources (ST 6) .....71	Legal Responsibility .....89	Distance Education .....86
Faculty.....76, 77, 87	Liaison Officer .....23	Hybrid .....88
Fees .....26, 28	Licensure.....90	Outcomes .....66
Final Approval .....87	Licensure Performance Data..... 66-67	Traditional .....94
Financial Aid.....73	Litigation Bond .....22	Public Institution .....92
Financial Resources-Standard 7.....73	Maintenance of	Publication of Status w/Commission 24
Financial Stability Requirements.....74	Accreditation File.....24	Publications (Requirements for). 92-93
Financial Statements	Media Services..... 69-70	Admission Policies.....81
Audited.....10, 17, 74, 83	Membership with the Council.....5	Advertising.....47
Focused Institutional Report.....30	Merger.....35, 42, 90	Mission Statement.....56
Focused Review .....17, 19, 28, 31	Mission	Non-Main Campus Sites .....39
Focused Team Evaluation .....31	of COE .....4	Reaffirmation .....11, 12, 13
Follow-up.....67, 80, 87	of Institution-Standard 1 ....56, 90	Real, Threatened, or Impending
Full-Time Equivalent (FTE) .28, 45, 87	Monitoring (Special Requirements)..45	Danger .....93
Generally Accepted Accounting	Non-Discriminatory Policy .....53	Recruitment.....46
Principles (GAAP).....83, 87	Non-Graduate Completer.....90	Refund Policy
Generally Accepted Government	Non-Instructional Support Staff .77, 78	COE..... 27-28
Auditing Standards	Non-Main Campus Sites.....8, 38	Institution .....74
(GAGAS) .....83, 88	Non-Public Institution.....90	Registrant .....93
Goals	Non-Restrictive Violation .....19	Reimbursements (for team visit).....28
of the Accreditation Process.....88	Notification of Apparent	Related Field Placement .....93
of the Council.....4	Deficiency .....18	Reports .....30
Good Cause.....19, 51, 88	Objective(s)	Restated (Revised) Audit .....74, 93
Governing Body or Board.....88	of Accreditation..... 55-82, 90	Restrictive Violation .....19
Graduate (see also, Completer).....88	of the Council.....4	Resources
Guidelines .....88	Occupational Advisory	Financial.....73
Health.....58, 61, 63, 71, 72	Committee.....57, 60, 90	Human.....76
Human Resources-Standard 8.....76	Occupational Area.....90	Learning .....69
Hybrid Program .....88	Occupational Education Institution...91	Physical .....71

Safety	
Facility .....	71
Instructional Equipment and Supplies .....	70
Part of Instruction .....	58
Student .....	71
Scope (Change of).....	36, 93
Self-Paced Instruction .....	93
Self-Study .....	15
Self-Study Workshop .....	12, 13
Penalty for Failure to Attend.....	29
Service Area .....	94
Show Cause Order .....	19
Site Visit For Accreditation.....	16
Staff .....	76, 77, 94
Standard(s)	
Definition of.....	94
for Accreditation .....	55-82
Status	
Annual Renewal of Candidacy ...	9
Award of Candidate Status.....	9
Monitoring .....	18
Notification of Apparent Deficiency .....	18
Pending Appeal .....	21, 33
Probation .....	19
Publication of.....	24
Reaffirmation of Accreditation.....	
.....	12, 13
Show Cause Order .....	19
Violation (Restrictive and Non-Restrictive .....	18, 19
Warning.....	19
Strategic Planning	
Standard 4 .....	68
Definition of.....	94
Student .....	94
Student Grievances/Complaints..	49, 80
Student Identity and Privacy .	58, 71, 72
Student Records .....	81
Student Recruitment.....	46
Student Services and Activities-	
Standard 10 .....	80
Substantive and Other Changes .....	31
Substantive Obligations .....	29
Teach-Out.....	44
Technical Infrastructure .....	71, 94
Third-Party Audit Review.....	28, 94
Time Period for Compliance.....	
.....	18-19, 20, 37, 51
Title IV Financial Aid .....	51, 74, 80
Traditional Program .....	94
Transcripts.....	81
Transfer of Credits .....	46
Transfer of Students .....	46
Tuition .....	59, 74
Unplanned Substantive Changes.	31, 37
U.S. Department of Education .....	
26, 37, 43, 45, 46, 50, 51, 52, 80	
Values (of COE).....	3
Vision, Institutional.....	68, 94
Visiting Team (Site Visit).....	16
Vocational English-As-A-Second- Language.....	81, 94
Voluntary Withdrawal .....	26
Warning.....	19
Withdrawal (Student).....	94
Withdrawal of Status (Voluntary) .....	26
Work-Based Activities .....	58, 62, 95
Work-Based Ethics.....	60, 95
Workshop Attendance Requirements	12
Eligible Representatives.....	12
for Annual Report .....	13
for Candidacy and Initial Acc. ..	12
for Reaffirmation.....	13
for Team Members/Leaders .....	14

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