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Foreword

The Accrediting Commission for Community and Junior Colleges’ (ACCJC) Accreditation Standards serve as the foundation for the institutional self-evaluation and the comprehensive evaluation team visit. The Standards are presented in four sections, but they relate to the institution in its entirety.

The process of institutional self-evaluation provides an opportunity for an institution to conduct a thorough evaluation of its educational quality and institutional effectiveness against the Eligibility Requirements (ERs), Accreditation Standards (Standards), including federal requirements, Commission policies, and the institution’s own objectives. The process of team evaluation allows peer professionals from colleges mostly in the Western Region (administrators, faculty, and other representatives) to consider the quality of the programs and services and institutional effectiveness in support of student success. This peer review process is unique to higher education accreditation in the United States.

Accreditation should not be seen as an event that takes place every seven years where compliance with ACCJC’s Accreditation Standards and other requirements is assessed. The accreditation process provides an opportunity for all constituency groups to take stock of the continuous improvement of the institution, in the context of the college’s mission. This is the context into which a peer review team conducts a visit to a member institution.

Introduction

The Team Training Manual is designed to be used by persons serving as peer reviewers visiting institutions that have completed an institutional self-evaluation. It is intended for use with the Guide to Evaluating and Improving Institutions which provides additional and important information for evaluation teams regarding Accreditation Standards, and Commission and federal policies. The evaluation team visit format described in this Manual is used by all teams visiting institutions seeking candidacy, initial accreditation, or reaffirmation of accreditation.

Private, non-governmental accreditation is based on a model of evaluation that involves both internal and external review of an institution. The accreditation paradigm includes the following elements:

- standards of good practice that are accepted by the member institutions;
- internal, self-evaluation by the institution at periodic intervals;
- assessment of the self-evaluation and the institution against the Commission’s Standards by a peer review team with recommendations to the institution and the Commission;
- decision by an independent Commission regarding the accreditation status of the institution;
- follow-up by the institution to address the institution’s own plans for improvement as well as the team recommendations identified in the evaluation team processes;
- possible follow-up visits by Commission representatives; and
- further review and decision by the Commission.

The evaluation team, made up of professional peers who volunteer their services, conducts a careful analysis of the Institutional Self-Evaluation Report, the evidence provided by the institution, and an on-site evaluation. The team:
• reviews the institution using the Eligibility Requirements, Accreditation Standards, and Commission policies (together Commission’s Standards);
• reviews evidence to support the narrative of the Institutional Self-Evaluation Report;
• notes areas that may have been inadequately recognized by the college itself;
• verifies that the college has set expectations (institution-set standards) for satisfactory student achievement (course completion retention and persistence; program, certificate and degree completion; graduation and transfer rates; licensure pass rates; and job placement), determines that the standards are reasonable, and reviews the institution’s actions in regard to its performance on its standards; and
• reinforces the college’s commitment to educational quality and institutional effectiveness.
1 The Role of the Federal Government

The 2008 Higher Education Opportunities Act, and subsequent changes to federal regulations by the U.S. Department of Education (USDE), put into law several requirements for accrediting agencies that seek federal recognition. The ACCJC holds USDE recognition and therefore will hold institutions accountable to federal regulations. Through USDE recognition, ACCJC’s member institutions qualify for a variety of federal financial aid programs. Each time federal regulations change, the Commission may need to revise its compliance components and the requirements to which institutions must conform. Therefore, all teams that conduct evaluation visits are required to review the following requisites of federal law:

- the institution’s continued compliance with the Commission’s Standards;
- the institution’s distance education and correspondence education programs and services to students;
- the off-campus locations where 50% or more of a program is offered;
- data on Student Achievement
- data on Student Learning;
- data on student success with respect to student achievement in relation to the institution’s mission (institution-set standards)
- data on the institution’s fiscal condition including increases or decreases in revenues and enrollments;
- records of formal student complaints;
- all student and public information the college releases about its credit requirements for programs, certificates, and degrees; length of programs; costs; student degree/certificate completion rates; transfer rates; job placement; licensure pass rates; and federally required campus crime statistics; and
- information on the health of the financial aid program(s) on the campus including loan default and repayment rates over the past three years, plans to reduce those rates where needed, reviews of financial aid program(s), and audits of same.
2 The Role of the Accrediting Commission

2.1 Communication with the Institution

About two years before the anticipated date of the comprehensive evaluation team visit, the Commission office advises the institution of its upcoming self-evaluation and evaluation team visit. The college is invited to select dates for the visit and to indicate any special expertise or experience it would like represented on the team. An opportunity is provided for the institution to attend a Self-Study Training workshop prior to the visit.

2.2 Team Chair Selection

Chairs of evaluation teams are invited to serve for their expertise and accreditation experience, taking into consideration the mission, culture, and uniqueness of the institution. The team chair generally has experience as a chief executive officer of an institution; others with senior level executive leadership experience may also chair.

2.3 Team Selection

Commission staff develops the peer review teams from a roster of experienced educators from across the region and are generally composed of eight to twelve individuals.

In compliance with federal regulations, teams are comprised of both faculty and administrators. The Commission may appoint other representatives, based on the characteristics of the institution being visited. These may include a governing board member, foundation director, members from institutions that award baccalaureate degrees, or other relevant professional experts. Teams may also include Commissioners or Commission staff.

Teams consist of individuals with expertise and/or experience in learning outcomes, learning resources, career/technical education, distance/correspondence education, student services, planning, research, and evaluation. Teams also include individuals with expertise and experience in institutional administrative functions including human resources, physical resources, technology finance and governance. Each reviewer is chosen to bring perspective to the task, not as a “representative” of an organizational constituency, but rather as peers who represent the Commission.

Each team is selected to provide experienced, impartial professionals appropriate for the institution being evaluated, and to address any special concerns the college may have expressed. Colleges may ask for special expertise. Teams are reflective of the diversity of the college and the region.

2.4 Team Training

All first-time reviewers are required to complete an online Accreditation Basics course prior to team service. The course is available on the ACCJC website at www.accjc.org. A New Peer Reviewer Basic Training is also available for first-time peer reviewers.

All reviewers are required to attend an Evaluation Team Training workshop each time they serve on an evaluation team. All team chairs are required to attend a Team Chair Training
workshop each time they serve and are in attendance at an Evaluation Team Training workshop with their teams.

2.5 Materials from the ACCJC
The Commission office will provide materials needed for the review. Examples of these materials are: a list of substantive change reviews since the last evaluation team visit, third party comments and/or complaints, and other resources necessary to conduct a complete review. The team chair also receives the most recent Annual Report and Annual Fiscal Report.

2.6 Materials from the College
The college sends copies of the Institutional Self-Evaluation Report, current catalog, and most recent class schedule to the team members and the Commission 60 days before the visit. Colleges may include additional materials that could inform the team and the Commission about the college.
3 The Role of the Reviewer

3.1 Peer Review

The evaluation team provides an independent, peer review of an institution. The team uses the Eligibility Requirements, Accreditation Standards, and Commission policies to prepare a report for the institution’s use which analyzes the adequacy of its resources, the effectiveness of its procedures, the quality of its performance in pursuit of its stated mission and goals, and its evidence of student achievement and student learning. The team seeks to verify quality and integrity and to encourage continuous improvement of institutional performance. The role of the peer reviewer is to determine if the college continues to meet the ERs, Accreditation Standards, and Commission policies and provide guidance for institutional improvement.

3.2 Conflict of Interest

The Commission makes a special effort to maintain the integrity of the accreditation process. To this end, peer reviewers are expected to disclose any possible conflict of interest before accepting an assignment. Commission policy identifies the following conditions under which a peer reviewer should decline an invitation to serve or ask for an assignment to another team. As prescribed by the Commission’s “Policy on Conflict of Interest for Commissioners, Evaluation Team Members, Consultants, Administrative Staff, and Other Agency Representatives,” the Commission will not knowingly invite or assign participation in the evaluation of an institution anyone who has:

- any current or prior employment at the institution/district/system being evaluated;
- current or prior candidacy for employment at the institution/district/system being evaluated;
- any current or prior service as a paid consultant or other business relationship with the institution/district/system being evaluated;
- any written agreement with an institution/district/system that may create a conflict or the appearance of a conflict of interest with the institution/district/system;
- personal or financial interest in the ownership or operation of the institution/district/system;
- close personal or familial relationships with a member of the institution/district/system;
- other personal or professional connections that would create either a conflict or the appearance of a conflict of interest; or
- received any remuneration, honoraria, honorary degrees, honors or other awards from the institution/district/system.

A conflict of interest arising from one of the relationships described above typically expires five years after the relationships ends. Team members or team chairs who have any questions about possible conflict of interest should contact the ACCJC staff.
3.3 **Expectations of Peer Reviewers**

Peer Reviewers are expected to:

- have a working knowledge of the Eligibility Requirements, Accreditation Standards, and pertinent Commission policies;
- understand that institutions are accredited using ACCJC’s Accreditation Standards rather than the regulations or requirements of other groups (see Note 1 below);
- understand that peer review is the basis of the accreditation process;
- remember that team members are peers who represent the Commission;
- review the college in the context of its mission;
- maintain objectivity and flexibility by refraining from imposing the opinions and beliefs of others and having a willingness to appreciate the uniqueness and individuality of the institution being evaluated;
- rely on evidence in making judgments about the institution;
- communicate clearly and concisely, both orally and in writing;
- work as part of a team; and
- maintain confidentiality. (See Note 2 below.)

**Note 1**
As a voluntary, nongovernmental agency, the Commission does not exercise the regulatory control of state and federal governments, nor apply their mandates regarding collective bargaining, affirmative action, health and safety regulations, etc. Furthermore, the Commission does not enforce the standards of specialized accrediting agencies or other nongovernmental organizations, nor the laws and regulations of state agencies although institutions may wish to review the publications of such other agencies as part of the self-evaluation process. The Commission has its own standards and expects that institutions and teams will apply them with integrity, openness, and an attitude of concern for students and the public interest.

**Note 2**
The Commission’s “Policy on Commission Good Practice in Relations with Member Institutions” requires that team members keep confidential “…all institutional information examined or heard before, during, and after the team visit and after the Commission acts.” The “Policy on Public Disclosure and Confidentiality in the Accreditation Process” requires evaluation team members “to refrain from discussing information obtained in the course of service as an evaluation team member. Sources of information that should remain confidential include the current Institutional Self-Evaluation Report; previous evaluation team reports; interviews and written communication with campus personnel, students, governing board members, and community members; evidentiary documents; and evaluation team discussions.”

The team chair will make assignments and seek information from team members well ahead of the visit. It is very important that each individual prepare materials and respond quickly to requests by the team chair. Each peer reviewer should read the entire Institutional Self-Evaluation Report carefully, especially those areas in which the team chair has given him/her a specific assignment.
During preparation, the peer reviewer should identify members of the college community to interview. Interview questions should focus on areas on inquiry based upon the review of the Institutional Self-Evaluation Report. Peer reviewers should come to the first team meeting prepared to summarize the key issues they have identified in their areas of responsibility, present drafts of questions for interviews, and share lists of those individuals or groups to be interviewed.

The team will assess the Institutional Self-Evaluation Report as a means for determining whether the institution meets Accreditation Standards and for identifying potential areas for improvement. Thus, each peer reviewer must clearly communicate with the team, maintaining balanced judgment, and cross-validating when conflicting information is discovered. While it is important to listen to any member of the college community who wishes to be heard, the peer reviewer must distinguish between the problems of individuals and those problems that could affect learning and teaching. In summary, the peer reviewer must be analytical, impartial, and able to make recommendations to the institution where it falls below expectations to meet ERs, Accreditation Standards, or Commission policies.

Peer reviewers are expected to arrive on time and to be present continuously for the entire visit, including the team chair’s oral report in the final meeting to the college on the last day. Team members are expected to devote their time during the visit to the assignments made by the team chair.

Although efforts are made for team members to attend a number of classes, it is not possible to visit every class or meet with every member of the faculty. Since most members of the faculty will have participated in the preparation for the evaluation team visit, all should be aware of the presence of the evaluation team and have opportunities to communicate with team members.

Peer reviewers are expected to review the courses/programs/services offered through distance/correspondence education to ensure they are characterized by the same concerns for quality, integrity, and effectiveness that apply to more traditional modes of instruction. Peer reviewers should also visit off-campus locations where 50% or more of a program is offered.

If the institution converts clock to credit hours for purposes of federal financial aid, the team is expected to verify the college adheres to the federal conversion formula.

(See Appendix F)

During the visit, the team must verify that the college continues to meet Eligibility Requirements 1 through 5, the Commission’s core criteria for institutional eligibility for accreditation. The remaining ERs are embedded within the Standards. Because these basic criteria must be continuously met, Commission policy requires that all accredited institutions include in their Institutional Self-Evaluation Report evidence demonstrating that they continue to meet these requirements. The Eligibility Requirements can be found in the Accreditation Reference Handbook.

3.4 **Peer Reviewers to Multi-College/Multi-Unit Districts or Systems**

The Commission evaluates colleges based on the Accreditation Standards regardless of how functions are organized. However, in multi-college districts/systems, key functions
related to the Standards are organized among the colleges and district/systems in many ways. In order to ensure that evaluation of all member institutions is equitable regardless of how they are organized, the individual colleges are held responsible for meeting the ERs, Standards, and Commission policies. Nonetheless, the Commission recognizes that the district/system plays a substantial role in the institution’s ability to meet the requirements and it expects that the district/system will support the colleges in this matter. The Commission’s “Policy and Procedures for the Evaluation of Institutions in Multi-College Multi-Unit Districts or Systems” can be found on the ACCJC website.

The college will supply peer reviewers to these institutions with a “functional map” of the delineation of functions of the district/system and the colleges. This “map” will account for all major functions regardless of whether it is a college or district/system function. The “map” will address all Standards and reflect consultation between the college and the district/system in its development. In its self-evaluation, the college will reflect on how the district/system functions affect the college’s ability to meet the Standards. (The Commission expects that the district/system chief executive officer (CEO) and governing board be involved in the development of the Self-Evaluation Report.)

The Commission conducts evaluation team visits to institutions in multi-college districts/systems simultaneously so that it can consider district/system issues when taking action on the accredited status of these institutions.

Peer reviewers on evaluation teams to colleges in multi-college districts/systems may be part of a small district/system team under the direction of a “Chair of Chairs” who may be selected from the team chairs involved. This team, consisting of all the team chairs plus team members selected for their expertise, will meet with district/system administrators before the college visits and explicitly identify problems pertaining to the Standards that are related to district/system functions. If recommendations are necessary, this team will ensure that they are included in the evaluation team report to each college as appropriate. Visits to institutions in large, multi-college districts/systems may be augmented by a separate district/system team.
4 The Role of the Team Chair

The team chair organizes the evaluation visit, makes necessary arrangements for the team, speaks for the team, and is the author of the final evaluation team report. Prior to the visit, the team chair contacts the institution and members of the team to ensure that needed resources will be available and that members are appropriately assigned. During the evaluation visit, the team chair organizes team discussions, sees that all necessary contacts are made, sees to the needs of the team, and assures that the team's time is used effectively. At the conclusion of the visit, the team chair conducts a final open meeting with members of the college community. At this meeting the team chair summarizes the major findings of the team but does not reveal the exact wording of team recommendations.

4.1 Before the Visit

The team chair makes a visit to the campus prior to the scheduled team visit. Several months may have passed since the self-evaluation was completed, and significant changes may have occurred which will materially affect the course and conduct of the site visit. This pre-visit to the college gives the team chair the opportunity to establish contacts with key individuals, get a sense of the physical layout of the team room, learn of any significant changes which may have occurred at the college, and begin logistical arrangements for the team, including assessment of computer hardware and software needs. The pre-visit also provides the college with a sense of what the team will need and the opportunity to correct any deficiencies the team chair may note.

4.2 Correspondence with the Team

The team chair corresponds with the team members to welcome them to the team, to make assignments, to provide information about travel and accommodations, to indicate the team schedule, and to set the tone for the entire visit.

4.3 Manager of the Site Visit

The team chair is responsible to the Commission for the successful completion of the evaluation site visit. In this capacity, the team chair guides the team during the visit, ensuring that the institutional outcomes are assessed in light of the institutional mission and the Accreditation Standards and that team members have the support necessary to complete their assignments.

4.4 Author of the Evaluation Team Report

The team chair is responsible for writing a clear, concise, well-organized and coherent document that will stand up under the careful scrutiny of a wide variety of readers. The report should honestly reflect the views of the team, setting forth the limitations and difficulties which the institution is experiencing and the plans and potential it has for overcoming them. When the written reports from the team members are well written, the team chair can often use major portions in the final report. However, team members should understand that the team chair is expected to produce a coherent, unified account of the team findings. In doing so, the team chair has considerable editorial latitude in constructing the final report.
Analysis of the Institutional Self-Evaluation Report

5.1 Preparation and Documentation

A peer reviewer will want to look at how the Institutional Self-Evaluation Report was developed, written, and edited; what evidence exists of broad involvement by campus constituencies; and the nature and quality of the evidence offered in support of the college’s assertions. In addition, the peer reviewer will want to determine if the Self-Evaluation Report serves as an effective vehicle for evaluation of the institution by noting if a team member could use the Report to assess the integrity, quality, and effectiveness of the institution. Evidence cited in the Report should provide the means for determining the extent to which the institution meets or exceeds the ERs, Accreditation Standards, and Commission policies.

5.2 Quality of the Institutional Self-Evaluation Report

The evaluation team should verify that the evidence referenced in the Self-Evaluation Report clearly demonstrates that the institution meets or exceeds the ERs, Accreditation Standards, and Commission policies and that the institution is achieving its mission, educational goals and objectives. The college should provide evidence that systematic and effective institutional planning and evaluation are being incorporated into institutional decision-making and resource allocation processes. The Self-Evaluation Report should also identify issues of concern to the institution.

5.3 The Guide to Evaluating and Improving Institutions

Reference to the Guide to Evaluating and Improving Institutions was made in the Introduction to this Manual. This Guide is designed to be used by institutions conducting a self-evaluation and preparing an Institutional Self-Evaluation Report as well as by teams conducting an evaluation team visit. The Guide is meant to provoke thoughtful consideration about whether the institution meets the Accreditation Standards and it is also intended to provide guidance for a holistic, systemic view of an institution and its quality. This common Guide is predicated on the belief that both institutional members and team members use the Standards to assess the institution, and that they should be using the same tools to conduct that assessment.
6  **During the Site Visit**

The evaluation team visit is the culmination of a great deal of work by many individuals at the institution being visited. If implemented well, the self-evaluation process will be of great value to the institution. Peer reviewers need to be sensitive to the impact of their presence on the multiple internal and external publics and stakeholders who interact with the college.

For peer reviewers, the team experience provides an opportunity to make a professional contribution which is not duplicated by any other experience. Working together with a group of colleagues, team members are able to become part of the life of an institution in a very positive way.

Peer review teams have the responsibility of determining whether the institution meets or exceeds the ERs, Accreditation Standards, and Commission policies and providing guidance to the institution in the form of recommendations to meet Standards or for improving the effectiveness of the institution. The team’s judgment about the educational quality of the institution assists the Commission in giving assurance to the public that the college is meeting its mission and educational purposes. Peer reviewers must not provide comments about ‘how it is done’ on his/her campus, make negative statements about the institution’s compliance with Standards, or act in a manner that could be interpreted as being authoritarian or autocratic.

As noted above, the team will be looking for evidence that the institution can demonstrate and support its assertions. In addition, the team will seek evidence of quality regarding the policies referenced in the Commission’s Standards, particularly, the “Policy on Distance Education and on Correspondence Education” and “Contractual Relationships Non-Regionally Accredited Organizations.” These policies are found in the *Accreditation Reference Handbook*.

6.1  **Initial Meeting of the Evaluation Team**

The team generally meets the day before the first day of the scheduled visit. At this first planning session, the team reviews assignments, examines supplementary materials, arranges schedules, discusses the Self-Evaluation Report of the institution, and may actually spend time at the institution examining evidence. Team members should come to this meeting prepared to summarize the key issues they have identified in their primary areas of responsibility, present drafts of questions for interviews, share lists of those individuals or groups to be interviewed, and present lists of additional evidence for review.

6.2  **Meeting with Institutional Staff**

Early in the visit, the team meets with administrators, the ALO, the self-evaluation steering committee, and other members of the college staff most involved in preparation of the Self-Evaluation Report. At the meeting, the team discusses the general plan of the visit with institutional staff. Team members can clarify questions they have about the institutional self-evaluation and schedule meetings with individuals or groups such as the governing board, faculty, administration, classified staff, students, and others. Remember, it is important to keep scheduled meetings with institutional staff.
The first meeting may be followed by a brief tour of the campus to familiarize team members with the physical plant and the locations for campus appointments.

6.3 **Remainder of the Visit**

Team members arrange interviews with college personnel and community stakeholders, make classroom and distance education (DE) visits, attend team meetings scheduled by the team chair, and review documents provided in the team room. The institution should provide class schedules and staff contacts for the team. Schedules of faculty office hours and telephone directories are helpful. The team should schedule one or more open sessions where administrators, faculty, staff, and students of the college may meet with team members on aspects of the self-evaluation. These sessions should be informal conversations, not large forums for formal presentations by special groups or special interests.

As mentioned previously, the team chair receives a summary of any formal complaints against the institution which have been received by the Commission. One or more team members may be asked to verify that any issues related to those complaints have been addressed. The college will provide some members of the team access to the formal file of student complaints to ascertain if the institution reasonably addressed the issues.

Occasionally, someone at the institution challenges the accreditation process, self-evaluation, or visit. Information concerning these situations should be brought to the attention of the team chair and the team as a whole.

6.4 **Team Meetings during the Visit**

The team holds meetings several times during the visit to summarize the work accomplished, to share concerns, and to plan for the remainder of the visit. In the late morning of the final day, the team meets to review findings and make final plans for the preparation of its evaluation team report, including what recommendations are to be included.

6.5 **Team Recommendations**

Team members must submit written statements on their assignments prior to the end of the visit. The team will finalize its recommendations for institutional improvement or for resolution of deficiencies at the end of the visit. The team chair will share the subject of these recommendations with the institution’s CEO in a private meeting, but given that the team has not yet edited and reviewed the complete report, neither the chair nor members of the team should share the exact wording of the team recommendations with the institution or anyone else.

Once the team has met, the team chair meets with the CEO of the institution to review major team findings and to ensure that the team has made no major errors of fact. The team chair reviews the subject of key team recommendations with the CEO of the college.
6.6 **Oral Report at Conclusion of the Team Visit**

The team chair conducts a final oral report with members of the college community. All team members are expected to be present. At this meeting, the team chair provides an oral report that articulates the major team findings but does not share specific recommendations. While team members are expected to be present for this final meeting, the team chair is the spokesperson for the team. The oral report should not be filmed or recorded by the institution.

Team members should depart immediately at the end of this meeting. Expressing thanks for assistance, enjoyment at meeting people or observing institutional activities is appropriate, but team members should avoid engaging in extended conversations about the visit. Team members should not respond to questions from the college community or the press any time after the visit.
7 After the Site Visit

7.1 Team and College Review of the Evaluation Team Report Draft
Following the team visit and prior to the submission of the final report to the Commission, the team chair submits a draft of the report to team members for comment. After the team chair adds the comments as appropriate, he/she sends a final draft to the CEO of the institution for correction of any factual errors. It is very important that team members communicate with the team chair about the draft in a timely manner.

Communication between the institution and the team should only occur through the team chair and/or the Commission office. Contacts by individuals from the institution or in the course of other professional activities should always be referred to the team chair or the Commission office.

7.2 Expenses and Reimbursements to Peer Reviewers
The ACCJC reimburses each team member for necessary travel, food, and lodging expenses.

Peer reviewers receive expense forms as part of the packet of information from the Commission office. Team members make their own travel and lodging reservations under the direction of the team chair and are reimbursed after the visit. Personal expenses not identified on the expense form are the responsibility of the team member. Team members must attach original receipts for public transportation and for lodging and meals to the expense form. Team members must secure approval in advance from the Commission staff for rental cars. All expenses claimed by the team must be submitted with original receipts within 30 days of the visit.

7.3 Evaluation of Team Members, Team Chair, and the Visit
In order to ensure the effectiveness of the evaluation process, the Commission requires that each of the Commission’s representatives be evaluated. Each team member is asked to evaluate the team chair, the team chair evaluates team members, and the CEO of the institution evaluates the team and the visit. (See Appendices A and B for the evaluation forms for team chair and team members.)
8 The Comprehensive Evaluation Team Report

8.1 Preparing the Evaluation Team Report

The evaluation team report is not usually a long document. It should be an honest and constructive document that the Commission can use in making a decision about the accredited status of the institution as well as a document that the institution can use for improvement. The report should:

- evaluate the institution in light of its own stated mission, objectives, Eligibility Requirement, Accreditation Standards, and Commission policies;
- make favorable comments when commendation is due;
- provide evidence to support conclusions and the recommendations of the team and provide a fair and useful estimate of the effectiveness of the institution;
- emphasize student achievement and student learning outcomes;
- avoid naming individuals, either in praise or blame. Comment, if necessary, on the office, not the officeholder;
- avoid being too prescriptive, leaving the specific remedy to be developed and implemented by the institution;
- serve the institution well for the next six or seven years; and
- be comprehensive in its scope.

8.2 Considerations for the Report

In preparing the written report, consider the following:

- **Internal Consistency**
  Does the report have internal consistency and flow logically, with no mixed or conflicting messages?

- **Clarity**
  Does the report say exactly what is intended so that there can be no accidental or deliberate misinterpretation?

- **Perspective**
  Does the language of the report clearly represent observations, findings, conclusions and recommendations as coming from the team as a whole, not just one member or one point of view?

- **Institutional Focus**
  Does the report deal fairly with the entire institution, without advocating selectively for constituency or other special interests?

- **Documentation**
  Does the narrative of the report support the recommendations? Do the observations, findings, and conclusions clearly state the context or evidence on which the recommendations are based? Are the specific Standards correctly cited to refer the institution to statements of best practice and Commission expectations?
• **Tone**
  Is the tone of the report appropriate to the circumstances and the intended effect? Unduly harsh criticism or language can affect the climate of an institution and can be harmful to individuals. The report should encourage the institution to take appropriate actions. Accreditation employs the language of diplomacy, while being direct and clear as to meaning.

• **Restraint**
  Does the report stray into enforcement or advocacy of matters outside the purview of the Commission’s standards of good practice? Advocacy of other positions, objectives, or compliance requirements, no matter how praiseworthy or fashionable, must be cast within the language of the Commission’s Standards.

• **Audience**
  Consider who may read the report, and with what purposes in mind. The document will be available to any persistent reporter, government agency, or legislator. Review the report through public eyes.

8.3 **Sample Format for Team Member Evaluation Report**

Team members form Standard teams and will prepare a written report to the team chair on the areas they have been assigned. Appendix C provides a sample template for the team members’ evaluation report. In addition, the team chair has copies of reports from teams visiting other colleges which can be used as models. Team members also have the report from the previous team to the institution being evaluated. If the report from the previous team was not well constructed, it may be a source of examples of things not to do as a peer reviewer. Team members should be alert to changes in format or expectations which may have been developed since the time of the example evaluation reports.

8.4 **Format of the Team Chair’s Evaluation Report**

The complete evaluation team report is written by the team chair. A format for the report is included below so that team members can understand what the entire report includes and how their report to the team chair contributes to the whole. Following is a format for the evaluation team report. Also, refer to the Formatting and Style Sheet for evaluation team reports (Appendix D).

1. **Title Page**
   This page states the name of the institution visited, dates of the visit, and name of the Team Chair/author of the report. It includes the statement: “This report represents the findings of the evaluation team that visited (name of College) on (dates).”

2. **Introduction**
   This section is a brief statement of the nature of the institution and its accreditation history. The team will make general observations about the institution and about the visit in the introduction. If the team is making commendations, they could be appropriately included in the introduction. Many evaluation team reports also include a list of the current team’s recommendations numbered as they are in the body of the report.
3. Evaluations Using Eligibility Requirements, Accreditation Standards and Commission policies

This section provides most of the substance of the report and is the section to which each team member makes a contribution. The team members’ reports, as described in Section 8.3 of this Manual, are used by the team chair in writing the evaluation team report for the college and the Commission. The teams’ written reports note whether evidence has been offered to demonstrate that the institution is accomplishing its published objectives and that these objectives are appropriate to higher education and comply with Accreditation Standards. The report establishes whether the institution meets each Eligibility Requirement, Accreditation Standard, and pertinent Commission policies.

4. Elements Which Should Not Be Part of the Standard Team Reports

1. Individuals should not be named, either in praise or blame. Comment, if necessary on the office or position, not the officeholder.
2. Avoid advocating individual educational or governance theories.
3. Neither advocate for, nor advise against, specialized accreditation. Program-specific accreditation is an institutional matter. If an institution has programmatic/specialized accreditation and uses that in its ISER as supporting evidence for meeting Accreditation Standards, the team may want to note that in its report.
4. Do not cite the formulas or requirements of legislative statues, specific organizations or associations, governmental departments, or other agencies.
Principles of Effective Recommendations

One of the most difficult parts of the team visit is drafting recommendations to the college. The team needs to choose a level of generality/specificity that best serves the college’s needs. The Commission believes that recommendations which are tightly linked to the Standards, and Commission policies and call for a thoughtful response by the institution are preferable to an extensive list of many details of how the institution is to achieve compliance.

In writing recommendations, be thoughtful about the institution’s need for specific language or more general language. A brief diagnostic statement of the problem, linked to the appropriate Accreditation Standard is usually sufficient, leaving the specific remedy to be worked out by the institution.

The content of the findings and conclusions sections of the evaluation team report should logically and clearly set the stage for any recommendation that the team wishes to make. All recommendations should be followed by a citation of the Standard(s) in question, assuring that the institution will understand what is being recommended and what Standard(s) are related. The evaluation team should review all draft recommendations as a group during and at the conclusion of the team visit, but the chair is required to consider editing them later to improve clarity and eliminate any inconsistencies that may exist.

1. **Recommendations should set expectations that an institution take an action or complete a task using language such as “complete the program review,” implement the new budgetary process,” etc.**

   Recommendations that tell an institution to “design a new budgetary process” often result in an institution’s failure to implement the recommendation, and recommendations that tell an institution to “review” or “consider” something frequently result in no action or improvement.

2. **Recommendations should reference the Eligibility Requirements (ERs) and Accreditation Standards.**

   Both the college and the Commission should be able to tell at a glance which ER(s), Standard(s), and Commission policies are being addressed. This can be accomplished by using language from the Standard and citing the Standard at the end of the recommendation (i.e., Standard II.A.6.c., ER 20, Policy on Distance Education and on Correspondence Education). An example of a recommendation with appropriate Standards cited follows.

   “…should establish clear, written policies and procedures delineating roles and responsibilities of the various campus constituencies that participate in institutional governance. (Standards IV.A.2, IV.A.3)”

3. **Recommendations should flow logically and clearly from the observations, findings, and conclusions in the evaluation team report.**

   The college will have difficulty responding to and understanding the rationale for a recommendation that has no prior reference in the report. The team should cite evidence it uses to conclude non-compliance with accreditation requirements.

4. **Recommendations should make it clear whether they are designed to bring the institution to a level that meets the Standard (“In order to meet this Standard,}
the team recommends that the college…” or whether they are designed to strengthen a condition that already meets the Standard (“In order to increase effectiveness, the team recommends that the college…”).

The content of the observations, findings, and conclusions sections of the evaluation team report should include a comment on whether or not the institution meets the Standard. (“The College meets the Standard.” or “The College does not meet the Standard.”)

5. **Recommendations should set expectations that an institution take an action or complete a task, using language such as “complete the program review,” “implement the new budgetary process,” etc.**

For example, recommendations that merely tell an institution to “design a new budgetary process” often result in an institution’s failure to implement the recommendation, and recommendations that tell an institution to “review” or “consider” something frequently result in no action or improvement at all.

6. **Recommendations which relate to several Standards should be combined into overarching recommendations.**

This will help to avoid repeating recommendations over and over for each relevant Standard. The team should carefully check Standard references when recommendations are combined since sometimes in the consolidation process, the links to specific Standards are weakened or lost. Overarching recommendations should be presented in their complete form in the Standard where they first occur and referenced thereafter. This sample combined recommendation has been carefully linked to the Standards.

**Sample Recommendation 1:**

“In order to meet the Standards and to ensure that progress continues and moves beyond the paper stage into the college’s operations, the team recommends that the college institutionalize its planning, program review, and budgeting process by implementing them and regularly using them. (Standards I.B, II.A, and III.C)”

**Sample Reference:**

*See Recommendation 1, Standard I.*

7. **The report should be consistent in its stance on key issues.**

Complimenting a college and making a recommendation on the same issue elsewhere in the report leads to confusion, and such inconsistencies will only serve to weaken the usefulness of the report. Recommendations should be consistent with the findings and evidence, and conclusions sections of the Evaluation Team Report.

8. **Recommendations should not contain references that are not part of the ERs, Accreditation Standards, and Commission policies.**

Terms like “Americans with Disabilities Act (ADA),” “shared governance,” “matriculation,” and “collegial consultation” have specific meaning in the systems which govern some member institutions. While the principles included in these terms may be embodied in the Accreditation Standards, avoid creating confusion that may result from the use of these specialized terms.

The following examples of poorly-written recommendations use terms that derive their meaning from sources other than the Standards

“The team recommends that the college review and validate instruments for cultural bias, meeting matriculation guidelines, and regulating cutoff scores.”
“The college should complete its Minimum Qualifications equivalency review of faculty.”

9. **Recommendations should not be based on the standards of governmental agencies, the legislature, or organizations.**

The relevant standards for the team are those of the ACCJC. Team member concerns about compliance with external laws or regulations can creep into a team’s recommendations, as in the following example of an inappropriate recommendation.

“The College President should ensure the full implementation of the new college quantitative program model and ensure implementation of the Accountability Model derived from Assembly Bill 1725.”

10. **Recommendations should be diplomatic, but not to the point of vagueness.**

The college needs to know what the problem is and not be put in the position of trying to guess what the appropriate response might be. The same comment might be made about recommendations which are clichés, or unsupported generalities. Some examples of what not to write are:

“The Physical Science building has numerous safety problems.”

“The College needs to do planning.”

“Cultural diversity needs to be clarified and communicated to the College community.”

11. **Recommendations should not be prescriptive.**

Describing how a problem should be solved should be left up to the institution.

Note how these recommendations are written; they are not to be emulated.

“The ventilation fan in the Central Duplicating area should be replaced with a heavy-duty model.”

“The college should have a Diversity/Affirmative Action Officer on campus in order to coordinate training for faculty screening committees and to provide multi-cultural awareness training for all staff.”

12. **Recommendations should not merely tell the college to “continue to” engage in a particular activity.**

Recommendations are intended to provide advice in areas where the college needs direction that will enable it to meet the Standards or improve.
10 Special Issues

10.1 Distance Education and Correspondence Education
(Addressed in Standards II.A, II.B, II.C and the Policy on Distance Education and on Correspondence Education)

Recognizing that most institutions must make use of the growing range of systems for delivery of instruction, including various electronic means, the ACCJC has adopted a policy based on principals of good practice to help assure that distance education complies with the Higher Education Opportunities Act -- 2008 (HEOA) and is characterized by the same concerns for quality, integrity, and effectiveness that apply to the more traditional face-to-face mode of instruction.

Distance education (DE) is defined as a formal interaction which uses one or more technologies to deliver instruction to students who are separated from the instructor and which supports regular and substantive interaction between the students and instructor initiated by the instructor, either synchronously or asynchronously. Distance education often incorporates technologies such as the Internet; 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, DVDs, and CD-ROMs, in conjunction with any of the other technologies.

Correspondence education (CE) is defined as education where the interaction between instructor and students is limited, is not regular and not substantive, and is primarily initiated by the student. Correspondence education may also use the technologies listed above.

Education delivered through these means may occur on campus as well as off campus. These interactions between the students and the faculty member may be synchronous or asynchronous. The institution must demonstrate that there is regular and substantive interaction between students and instructors, and teams must verify this during the visit.

For a complete definition of distance education and correspondence education, refer to the Guide to Evaluating and Improving Institutions and/or the Commission’s “Policy on Distance Education and on Correspondence Education.” The team will determine whether the institution uses the appropriate definition for these alternate delivery modes.

Peer reviewers are expected to assess distance learning activities of the college, using both the Accreditation Standards and the “Policy on Distance Education and on Correspondence Education” which can be found on the ACCJC website, under policies.

In addition, the HEOA 2008 requires that institutions which offer distance education or correspondence education (DE/CE) have processes in place through which the institution establishes that the student who registers in a DE/CE course or program is the same person who participates each time in and completes the course or program and receives the academic credit. This requirement will be met if the institution verifies the identity of a student who participates in class or coursework by using, at the institution’s discretion, such methods as a secure log-in and password, proctored examinations, and/or new or other technologies and/or practices that are developed and effective in
verifying student identity. The institution must also publish policies that ensure the protection of student privacy and will notify students at the time of class registration of any charges associated with verification of student identity.

10.2 Records of Student Complaints
(Addressed in Standard II.B and Policy on Student and Public Complaints against Institutions)

Teams will review the formal complaints/grievances filed by members of the institution (faculty, staff, students) to determine that relevant policies and procedures are being followed and whether patterns to the complaints are obvious that could indicate a need to be addressed by the institution. The institution is expected to provide, for the team’s review, complaint files for the period since the last comprehensive visit. The team will also ascertain whether the college website informs the public how to file a complaint with the ACCJC.

10.3 Off-Campus Sites
(Addressed in Standards II.A, II.B, II.C, and III.B)

The College should provide a list of off-campus sites, including locations, programs offered, and enrollment. The team should make reference in its report to any new (since the last comprehensive review) sites that have not participated in the Commission’s Substantive Change review process. The team needs to carefully review all off-campus sites where 50% or more of a degree, program, or certificate can be earned to assure they comply with Standards. (See Substantive Change Policy in the Accreditation Reference Handbook.)

10.4 Institution-Set Standards
(Addressed in Standard I.B)

As mentioned previously in this Manual, the institution must establish standards of success with respect to student achievement in relation to the institution’s mission. It will set expectations for course and program completion, student persistence from term to term, degree and certificate completion, State licensing examination scores or pass rates, job placement, and transfer rates. The institution must demonstrate it gathers data on institution-set standards, analyzes results on student achievement, and makes appropriate changes/improvements to increase student performance, educational quality, and institutional effectiveness. Evaluation teams will identify these institution-set standards, determine their reasonableness, review the data and analyze the college’s performance, describe the institution’s overall performance, and determine whether the institution is meeting its standards and whether it plans for improvements in areas where its standards are not met.

10.5 International Programs

Colleges offering international programs for non-U.S. nationals must include an addendum to the Self-Evaluation Report which demonstrates how the program conforms
to the Commission’s policy on “Principles of Good Practice in Overseas International Education for Non-U.S. Nationals.” Teams must address these programs in the evaluation team report.

10.6 **Commission Policies**

*(Addressed in a separate section immediately preceding Standard I)*

Colleges must address, and teams must verify, how well they comply with Commission policies, specifically the following:

- Policy on Distance Education and on Correspondence Education
- Policy on Institutional Compliance with Title IV
- Policy on Representation of Accredited Status
- Policy on Institutional Degrees and Credits
- Policy on Institutional Integrity and Ethics
- Policy on Contractual Relationships with Non-Regionally Accredited Organizations
- Policy on Student and Public Complaints against Institutions

10.7 **Evaluation Team Responsibilities for Compliance with United States Department of Education Regulations**

*(Appendix E)*

10.8 **Clock-to-Credit-Hour Conversion Requirements**

*(Appendix F)*
Checklist for Compliance with Federal Regulations and Commission Policies (Appendix G)

A Checklist for teams to use to when evaluating institutional compliance with Federal Regulations and Commission policies, in addition to what is specifically evaluated within the language of the Accreditation Standards, is provided to the team chair for use during the evaluation team visit. For each category, team members are asked to evaluate the specifics of federal regulations or Commission policies, reach a conclusion regarding the institution’s compliance, and provide appropriate narrative. **NOTE: This checklist will become part of the Evaluation Team Report.**
11 Frequently Asked Questions

How can the Self-Evaluation Report be used as a primary source document?

The institution has the responsibility to demonstrate that it meets or exceeds the ERs, Accreditation Standards, and Commission policies; therefore, accreditors expect the team to use the Institutional Self-Evaluation Report (ISER) as a primary source document for the evaluation team visit. A team should confirm that the assertions and evidence presented in the ISER are in fact observable at the institution.

Team members should begin by understanding the meaning of the Accreditation Standards. The self-evaluation represents the institution’s understanding of its performance against those Standards. The team should use the ISER to acquire, through interviews, meetings, direct observation, and examination of written evidence, enough information to support a professional judgment that the institution meets or exceeds the Standards.

How do I cross-validate? What happens if I get conflicting versions of an event?

In any college, there may be differences about what the facts are, about how the facts should be interpreted, and about what values the facts represent. In a good ISER, the institution will have directly addressed these differences without pressure to reach a false consensus just to make the college look good. Just as validation involves a special type of assessment, cross-validating asks you to confirm that the information you receive, from whatever source, is correct, and not just the opinion or point of view of one individual or group.

There may be individuals at the college that may attest that certain information was not allowed to be in the ISER; or may suggest alternative interpretations are more appropriate; or may not appear to be credible witnesses on the surface; and others may try to use their position or office to give more credence to their statements. Team members should verify through subsequent meetings and discussions with team members and college representatives whether or not information is reliable.

How do I organize all this information which comes from so many sources?

The best way to organize the information is to be fully prepared. That means careful reading of the entire Self-Evaluation Report, understanding of the Eligibility Requirements, Accreditation Standards, and Commission policies in the Accreditation Reference Handbook, careful review of the Guide to Evaluating and Improving Institutions, development of a strategy for meeting with individuals and groups, and thinking about the report before the visit begins.

Once the visit starts, team members will be literally bombarded by hundreds of bits and pieces of information. One way to organize the material is to prepare a report template of the Standards for which you have responsibility, using the report format guide in this Manual (Appendix C). As you read the ISER, make brief notes...
and indicate any questions you have. Fill in your template with information gathered from the interviews and meetings as your observations and analyses. As you work through the visit with other team members assigned to work with you in Standard teams (described in Section 8.3 of this Manual), you will be able to see quickly what areas remain to be covered, what areas need further work, and what areas are complete. When your group completes an area, begin drafting your Standard team’s report to the team chair for that section. You can always go back and change it as new information becomes available to you.

What do I do if I find an issue that isn’t discussed in the Institution Self-Evaluation Report?

Remember that the institution may have printed the ISER as much as four months before the visit. By definition, it is a record of the status of the institution at that time. On the other hand, institutions do not stand still, waiting for the evaluation team to arrive. Your team chair makes a pre-visit to the college shortly before the team visit and will brief you on any important events or changes at the institution to that date. Even with this information, more recent developments may be pertinent to the team’s work. There have even been cases where the course of events has rendered much of the information in the ISER irrelevant or at least very much out of date. The institution also has a responsibility to provide important new information, especially if that information contradicts that found in the ISER. Often, this takes the form of an update to the self-evaluation document.

The first level of assessment should be to ask yourself whether the topic is an accreditation issue. In this situation, refer to the Accreditation Standards for information. You should certainly discuss the matter with the team chair. If the issue does not seem to be covered by one of the Eligibility Requirements, Accreditation Standards, or Commission policies, discuss the matter with the team as a whole at the next team meeting. The team decides how to deal with it. If the situation is such that the institution should have provided more current information to the evaluation team, then the team has the opportunity to comment on that in the report.

How should I handle information that does not relate to my specific assignment?

Take note of the information and its source, get copies of any printed information, and take the information back to the team chair and evaluation team as a whole so the person with that responsibility can use it. You don’t have time to go off on a tangent, but you do have a responsibility to gather useful information for your colleagues. At the same time, if you have not been able to validate some of your own areas, don’t forget to ask your fellow team members if they have come across information that you need.

How should I respond to those who ask me to decide who is right and who is wrong on an issue?

There have been instances when individuals or groups on a campus believed that the purpose of the visit was to settle the disputes or disagreements present at the time of the visit. As tempting as it may be, expressing an opinion favoring one side or the other jeopardizes the independence and credibility of the team’s work.
Politely, but firmly, remind the person or group that the Accreditation Standards are the basis of the evaluation team's assessment and that it would be inappropriate for the team to interject itself into an individual or group dispute. This issue is especially delicate in individual personnel issues or issues where there may be legal action.

**How do I write my report so it sounds like a team effort?**

The overall style and tone of the report is very important. Team members are collegial, peers, not external inspectors. At the same time, the team has the responsibility to point out to the institution areas where the institution should address improvements and issues which indicate that the institution does not meet the Commission’s Standards.

The evaluation team report is an important document because it is the vehicle by which critical judgments about institutional performance and quality are expressed by the Commission, and through which formal advice about improvement is given. The report must be a credible and clearly-written document to have the desired effect. Consider that:

- The evaluation team report is analyzed in detail by members of the Commission in reaching decisions about the status of the institution;
- The evaluation team report is read by faculty, administrators, the public, and trustees of the institution;
- The evaluation team report has a life of seven years, in that the institution must respond to recommendations in its Midterm Report (possibly Follow-Up Report(s)); and
- The evaluation team report is permanently filed at the college and the Commission office. It may be examined by the college community and/or researchers; job applicants at the institution may request copies; and government agencies or the courts may subpoena them.
12 Outline of the Evaluation Team Visit

This section outlines the important characteristics and processes of a team evaluation. While each visit has its own unique characteristics and context, there is a fairly predictable pattern of events.

I. Before the Visit

A. Information from the Commission Office
   1. Invitation to serve on an evaluation team
   2. Notice of training workshop
   3. Team Training Workshop and resources
      a. Team Training Manual
      b. Guide to Evaluating and Improving Institutions
      d. Twelve Common Questions and Answers About Regional Accreditation
      e. Team Training Materials
   7. Team roster

B. Information from the institution—at least eight weeks before the visit
   1. Institutional Self-Evaluation Report
   2. Current catalog
   3. Current class schedule

C. Information from the Team Chair
   1. Introductory information and welcome
   2. Team survey for making assignments
   3. Team member overview of the Institutional Self-Evaluation Report
   4. Team schedules, logistical arrangements, and other matters of interest

D. Team Member Activities before the Visit
   1. Complete the Accreditation Basics course online (for first-time peer reviewers)
   2. Attend mandatory Team Training workshop
   3. Read Commission manuals, guides, and related materials
   4. Read entire Institutional Self-Evaluation Report and related materials
   5. Review electronic evidence provided by the institution
   6. Respond promptly to team chair requests for information and reports
7. Prepare analyses of Institutional Self-Evaluation Report as requested by the team chair
8. Prepare lists of individuals/groups for interviews to give to the team chair
9. Prepare analytical questions regarding the Institutional Self-Evaluation Report
10. Make appropriate travel arrangements

II. During the Visit

A. The First Team Meeting
   1. Arrive on time
   2. Bring appropriate reports or analyses, according to team chair instructions
   3. Discuss initial team reactions to the Institutional Self-Evaluation Report, identify common concerns or themes, and determine team approach to institutional issues

B. The First Day
   1. Attend opening meetings, campus tours as scheduled
   2. Become familiar with documents presented electronically and in the team room; examine those documents relevant to the areas of primary and secondary responsibility
   3. Schedule and conduct meetings and appointments, including evening and off-campus locations and distance education programs and services
   4. Participate in team meetings as scheduled
   5. Confer with other team members as needed
   6. Visit classes/centers and DE/CE courses as appropriate
   7. Begin team discussion of core institutional themes
   8. Organize findings of first day activity and identify issues/questions for second day focus
   9. Continue writing first draft of report to team chair

C. The Second Day
   1. Continuation of first day activities with special focus to:
      a. Complete validation of areas not addressed the previous day
      b. Pursue any issues delegated by the team chair
      c. Conduct cross-validation of evidence for which conflicting information is provided
      d. Conduct careful evaluation of institutional evidence to support assertions made in the Institutional Self-Evaluation Report
      e. Coordinate findings with other team members
2. Team meetings and discussion of core themes
   a. Identify key team recommendations
   b. Confirm that all Standards are being addressed by the team
   c. Develop framework for the evaluation team report
   d. Submit assigned Standard Team Member evaluation team report draft
   e. Complete assigned Standard team member report
   f. Develop formal recommendations

D. The Third Day

1. Complete gathering final information or evaluation of evidence

2. The final team meeting
   a. Review team member findings, reports, and recommendations
   b. Agree on team recommendations
   c. Submit final assigned Standard team member report to team chair
   d. Sign the Certification of Team Member Participation form

3. Attend final open meeting and leave campus promptly

III. After the Visit

A. Send Expense Form (with original receipts) to Commission office within 30 days

B. Review team chair’s draft of the final evaluation team report

C. Complete the Appraisal of the Team Chair and Evaluation Visit Form
Appendices
Appendix A: Team Chair Appraisal of Evaluation Team Members Form

Your confidential appraisal of this evaluation team member is helpful to the ACCJC

Evaluation Visit To: ________________________________________________________________

Confidential Appraisal of: __________________________________________________________

Please respond to each statement listed below by using this scale:

1 = Strongly Disagree  2 = Disagree  3 = Neutral  4 = Agree  5 = Strongly Agree

Please rate the team member on the extent to which he/she:

Circle One

2. Performed tasks as requested, including arriving and departing on schedule and preparing requested reports prior to the visit.
3. Displayed a helpful yet objective attitude toward the college, particularly in the areas of his or her assigned responsibilities.
4. Contributed to team discussions and supported the team’s efforts.
5. Understood the purposes of accreditation and his/her role in verifying the Institutional Self-Evaluation Report.
6. Prepared good quality portions of the team report.
7. Was an asset to the evaluation team process.
8. Should be invited to serve on a future evaluation team.

Please indicate the Standard(s) the team member was assigned to, and his/her level of expertise in covering the assigned Standard(s) using the following scale: 1 = Very Poor, 2 = Poor, 3 = Neutral, 4 = Good, 5 = Excellent):

Standard(s): I  II  III  IV  Expertise Level: 1  2  3  4  5

Please identify general strengths and weaknesses of the team member:

__________________________________________________________________________________
__________________________________________________________________________________

Additional Comments:
__________________________________________________________________________________
__________________________________________________________________________________

Signature: ____________________________________________ Date: ________________________
Appendix B: Team Member Appraisal of Team Chair and Evaluation Team Visit Form

Your confidential appraisal of the team chair, including the evaluation team visit, is helpful to the ACCJC

Evaluation Visit To: ____________________________________________________________

Confidential Appraisal of: ________________________________________________________

Please respond to each statement listed below by using this scale:
1 = Strongly Disagree  2 = Disagree  3 = Neutral  4 = Agree  5 = Strongly Agree

Please rate the Team Chair on the extent to which he/she

<table>
<thead>
<tr>
<th>Circle One</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 2 3 4 5</td>
</tr>
</tbody>
</table>

1. Provided the necessary materials and information about the evaluation team visit in a timely manner.

2. Organized the visit well and made team assignments that were reasonable and appropriate.

3. Provided capable guidance to the team before, during, and after the evaluation team visit.

4. Made clear and helpful suggestions to the team as a whole and to individual team members.

5. Maintained an unbiased and objective attitude toward the college.

6. Should be invited again to serve as a team chair.

Suggestions for Improvement of the evaluation team process:

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

__________________________________________________________

Signature ________________________________________________ Date: __________________________

Appendix B: Team Member Appraisal of Team Chair and External Evaluation Visit Form
Appendix C: Team Member Evaluation Team Report Template

I. Eligibility Requirements

Team members will ascertain whether the institution continues to meet each Eligibility Requirements through an examination of appropriate evidence.

II. Compliance with Commission Policies

The team will ascertain whether the institution is in compliance with the Commission policies noted in Section 10.6 of this Manual.

III. Accreditation Standards

The members of the evaluation team assigned to specific Standards will ensure that each Standard is covered in the following fashion:

A. General Observations

The Standard team may make observations on the overall quality of the Standard, some recent changes in the institution that warrant notice, helpfulness of the staff, etc. that were observed through interviews, documentation, meetings visits, etc.

B. Findings and Evidence

Each Standard team should include discussion of the findings (observations and analyses) about the degree to which the institution meets or does not meet each Standard and the evidence the team used to reach that finding. This narrative should cite the Standards discussed at the end of each paragraph (in parenthesis) and ensure that each Standard is discussed. Institutional strengths and weaknesses, areas where the institution does not meet or exceed Accreditation Standards, ways in which the institution can use the ISER, and process for institutional improvement, and evaluation of the quality of the ISER itself might also be included in this section. The Commission requires that the team comment on the following special areas:

- the institution’s status in developing student learning outcomes for courses, programs, certificate, and degrees; measuring them; and using the results of measurement to plan and implement institutional improvements regardless of mode of delivery or location; discussion of the institution’s status in setting standards for student achievement;
- the degree of institutional dialog about student learning and student achievement as well as about institutional processes for evaluation and plans for improvement; evidence of a culture and practice that supports continuous improvement;
- the team’s description of the institution-set standards for student achievement, as well as its view of the reasonableness of those standards, and its analysis/commentary on the institution’s performance with regard to those standards; and
- longitudinal data on the institution’s fiscal condition, including significant increases or decreases in revenues and enrollments, and identify concerns about fiscal stability.

Each Standard team should also include a discussion of the Standard team members’ evidence used to conduct the analysis and to support the team’s conclusions.
C. Conclusions

Each Standard team’s statement should include a brief conclusion section that states whether the institution meets, or does not meet, or exceeds each Standard. This section might also include general observations and any commendations the team wants to make on this Standard.

D. Recommendations

The Standard team should include a section of recommendations, if any, for the Standard. At the final team meeting, these draft recommendations may be accepted, modified, combined with other recommendations, or deleted. It is important that all recommendations be those which the entire team accepts, not just the perspective or interests of one person.
### Appendix D:
Suggested Formatting and Style Sheet for Evaluation Team Reports

<table>
<thead>
<tr>
<th>In Document</th>
<th>Formatting and Style</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Titles</strong></td>
<td>Times New Roman, 14 pt., bold</td>
</tr>
<tr>
<td><strong>Subheadings</strong></td>
<td>Times New Roman, 12 pt., bold</td>
</tr>
<tr>
<td>Body text</td>
<td>Times New Roman, 12 pt., Left Justified</td>
</tr>
<tr>
<td>Page numbers</td>
<td>Place in footer, either in bottom right or center</td>
</tr>
<tr>
<td>Margins</td>
<td>1.25” left; 1” right; 1” top; 1” bottom</td>
</tr>
<tr>
<td>• Bullets</td>
<td>Circle bullet, Times New Roman, 12 pt</td>
</tr>
<tr>
<td>Underline</td>
<td>Use single line only. Do not use excessively.</td>
</tr>
<tr>
<td><em>Italics</em></td>
<td>Use italic font to emphasize, not bold font.</td>
</tr>
<tr>
<td>Acronyms</td>
<td>Spell out the names of groups on the first reference, followed by the acronym, e.g.,</td>
</tr>
<tr>
<td></td>
<td>the Accrediting Commission for Community and Junior Colleges (ACCJC). The acronym for</td>
</tr>
<tr>
<td></td>
<td>U.S. Department of Education is USDE (not U.S.D.E.) The acronym may be used alone on</td>
</tr>
<tr>
<td></td>
<td>second reference.</td>
</tr>
<tr>
<td>Numbers</td>
<td>Spell out numbers one through and including ten; use numbers for larger numbers.</td>
</tr>
<tr>
<td></td>
<td>A number that begins a sentence should be spelled out.</td>
</tr>
<tr>
<td></td>
<td>Credit hours should be expressed as numerals.</td>
</tr>
<tr>
<td>Abbreviations</td>
<td>Spell out state names in text; abbreviate them only in addresses, lists, etc.</td>
</tr>
<tr>
<td></td>
<td>Spell out “and” instead of the symbol&quot;&amp;&quot;unless it is part of an official company name.</td>
</tr>
<tr>
<td>Commas</td>
<td>When a conjunction joins the last two elements in a series, use a comma before the</td>
</tr>
<tr>
<td></td>
<td>conjunction (e.g., board, administrators, faculty, staff, and students). Commas</td>
</tr>
<tr>
<td></td>
<td>always go inside quotation marks. Do not use excessively.</td>
</tr>
<tr>
<td>Colons</td>
<td>Colons go outside quotation marks unless they are part of the quotation itself.</td>
</tr>
<tr>
<td>Percentages</td>
<td>Spell out “percent.” Use the symbol (%) only in scientific, technical, or statistical</td>
</tr>
<tr>
<td></td>
<td>copy.</td>
</tr>
<tr>
<td>Latin terms</td>
<td>Do not underline or italicize.</td>
</tr>
<tr>
<td>a.m./p.m.</td>
<td>Express as “a.m.” and “p.m.” with periods and lowercase.</td>
</tr>
<tr>
<td>In Document</td>
<td>Formatting and Style</td>
</tr>
<tr>
<td>-------------</td>
<td>----------------------</td>
</tr>
</tbody>
</table>
| **Hyphens** | No spacing before or after hyphens.  
Hyphenate two-word adjectives used with a compound modifier (e.g., high-unit program).  
Do not hyphenate words beginning with “non,” except those containing a proper noun (e.g., nonresident; non-German; non-degree-seeking) or when the second element consists of more than one word (e.g., a full-time student; attending school full time).  
Do not hyphenate words with the suffix “wide” (e.g., District wide; College wide). |
| **Capitalization** | Capitalize the following words or phrases when referencing the Commission and/or the ACCJC Accreditation Standards:  
• “Commission”  
• “Accreditation Standards”  
• “Standards” (e.g., “In order to meet Commission Standards…”).  
Capitalize “College” and “District” when referencing a specific college or district (i.e., capitalize when you can replace “College” with a college name and when you can replace “District” with a district name).  
Capitalize the first word following a colon when the word begins a complete sentence.  
Capitalize titles preceding names (e.g., Bay College President Chris Smith).  
*Do not* capitalize the following:  
• “federal” or “state,” unless it is capitalized in an official name.  
• “fall” or “spring” (e.g., fall semester enrollment).  
• Titles following names or standing alone (e.g., Chris Smith, president of Bay College; Marcia S. Jones became president in 2001). |

**WRITING STYLE**

Be accurate. Nothing else matters if facts are not correct.

Do not write in the first person; use third person.

Use the active voice. The active voice is more direct and vigorous than the passive voice.

Passive example: Commencement was attended by hundreds of people.  
Active example: Hundreds of people attended commencement.

Be concise. Avoid jargon in text. Keep it as simple as possible.

Be specific, definite, clear, and concrete. Explicit writing holds the attention of readers.
## Appendix E:

**Selected Evaluation Team Responsibilities for Compliance with U.S. Department of Education (USDE) Regulations**

(Revised March 2016)

<table>
<thead>
<tr>
<th>Paragraph of 34 C.F.R.</th>
<th>USDE Regulation and USDE Guidelines for 34 C.F.R.</th>
<th>Evaluation Team Responsibility</th>
</tr>
</thead>
</table>
| 602.23(b)             | In providing public notice that an institution...subject to its jurisdiction is being considered for accreditation or pre-accreditation, the agency must provide opportunity for third-party comment concerning the institution's...qualifications for accreditation or pre-accreditation. At the agency's discretion, third-party comment may be received either in writing or at a public hearing or both. | Address in Standard I.C.12, I.C.13  
The evaluation team will determine whether the institution has made an appropriate and timely effort to notify the campus community and public of the opportunity for submission of third-party comments and the process for doing so.  
The evaluation team will be notified if ACCJC has received third-party comments as they relate to the compliance of a member institution with the Accreditation Standards prior to the evaluation visit.  
*(Standard I.C.12, I.C.13; ER 21; Policy on the Rights and Responsibilities of the Commission and Member Institutions (F) and the Policy on Commission Good Practice in Relations with Member Institutions (5))* |
| 602.16(a)(1)(i)       | Standards effectively address “success with respect to student achievement in relation to the institution’s mission...including as appropriate consideration of course completion, State licensing examinations, and job placement rates”  
Whether institutionally-developed standards to demonstrate student success                                                                                                                                                                                                                                           | Address in Standard I.B  
The institution must set standards for satisfactory performance of student success (student achievement and learning).  
The evaluation teams examine the institution-set standards for student success and achievement and assess their appropriateness. Evaluation teams examine institution summary data on course completion rates, licensure pass rates where available, and job placement rates where available. The team also examines program/certificate completion data and graduation data provided by the college. These data are examined in the context of the institution-set standards of satisfactory performance and goals for improvement of student success (student success and student learning). The evaluation team cites this information as evidence of the institution’s success. |
success are being used by the accreditor in the accreditation assessment, and the institution’s performance with respect to student achievement is assessed.

accomplishment of mission. The evaluation team report cites the use of this evidence in describing its evaluation of how well the institution fulfills its mission.

(Standards I.A.2, I.B.3; ER 11)

<table>
<thead>
<tr>
<th>Standards effectively address the quality of the institution or program in: “ensuring that any awarded academic credits/degrees/credentials conform to commonly accepted practice including time invested and content mastered.” If the institution converts clock hours to credit hours for purposes of federal financial aid, the institution adheres to the Department of Education’s 2011 conversion formula.</th>
<th>Address in Standard II.A</th>
</tr>
</thead>
<tbody>
<tr>
<td>602.16(a)(1)(viii) 602.24(e) 602.24(f)</td>
<td>The evaluation team will examine and evaluate the reliability and accuracy of the institution’s assignment of credit hours by reviewing the institution’s related policies assignment of credit hours by reviewing the institution’s related policies and procedures and application of those policies and procedures to programs and courses. The evaluation team samples at least five course outlines and corresponding syllabi, and examines the class schedule, to determine that the institution has assigned an appropriate amount of work to conform to the Carnegie Unit, and this sampling must include:</td>
</tr>
</tbody>
</table>
| As pertains to: 600.2 (Credit Hour) | • At least one distance education course  
• At least one classroom-based course with a laboratory  
• At least one course that provides for clinical practice, if applicable to the institution  
• At least one class that converts clock hours to credit hours for purposes of awarding credit if the institution does so |
| | The evaluation team will examine institutional policies and procedures for measuring the program length and intended outcomes of degrees and certificates offered. |
| | The evaluation team will confirm the institution has transfer-of-credit policies that are publically disclosed and that include a statement of the criteria regarding the transfer of credit earned at another institution of higher education |
| | Since USDE regulations establish a minimum standard, and institutions may choose to include more work for their credit hours than the minimum amount, credit hours at one institution will not necessarily equate to credit hours at another institution for a similar program. |
| | The evaluation team will, in the evaluation team report narrative of its
Appendix E: Selected Evaluation Team Responsibilities for Compliance with USDE Regulations

**Address in Standard II.A**

The evaluation team will review the manner in which the institution determines if a course is offered by distance education or correspondence education. The team will examine the delivery mode of a sampling of courses where students are separated from the instructors. The team must assess whether the courses are distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student’s grade) or correspondence education (online activities are primarily “paperwork related,” including reading posted materials, posting homework and completing exams, and interaction with the instructor is initiated by the student as needed). Use of a learning management system alone will not determine whether the mode is distance education; course syllabi, grading policy, and actual instructional delivery determine how the mode is characterized for USDE purposes. The team will describe its findings and the team’s judgement of the appropriateness of institutional application of the USDE delivery mode definitions.

The evaluation team will examine the efficacy of methods that the institution uses to verify the identity of students enrolled in distance education and correspondence education classes. The evaluation team will describe whether the institution uses the secure log in and password for its distance education classes. If the institution uses other methods for its distance education classes or correspondence classes, the evaluation team will describe those methods and the team’s judgement of their efficacy in preserving the integrity of the credits and grades awarded.

*Standards II.A.1, II.A.3, II.A.7, II.B.1, II.C.1; and Policy on Distance Education and on Correspondence Education*
<table>
<thead>
<tr>
<th>Password (ii) Proctored exams (iii) New or other technologies and practices that are effective in verifying student identity</th>
<th>Address in Standard I.C. and ER 20</th>
</tr>
</thead>
<tbody>
<tr>
<td>602.16(a)(1)(ix) And related 668.43</td>
<td>The evaluation team will be sent a copy of any complaints that have been filed with the ACCJC in accordance with the criteria for filing such complaints. The evaluation team will examine the institution’s procedures with define student grievances/complaints and the manner in which they are received and will examine the institution’s files containing student complaints/grievances for the five years preceding a comprehensive evaluation. The evaluation team will examine any patterns observed in the complaints to determine whether they constitute evidence that indicates the institution has failed to comply with Accreditation Standards, ERs, and policies. Any deficiencies will be identified in the team report as such. (Standards I.C.5, I.C.8; ER 20; and Policy on Student and Public Complaints against Institutions)</td>
</tr>
<tr>
<td>The standards effectively address the quality of the institution in addressing: “the record of student complaints received by, or available to, the agency.”</td>
<td>The evaluation team will examine the institution’s means of providing to any student or prospective student information about its accrediting bodies and governmental (usually state) licensing or approval bodies, copies of documents describing an institution’s accreditation or governmental approval, as well as contact information for filing complaints with such bodies. The team report will describe the institution’s compliance with this requirement. (ER 20)</td>
</tr>
<tr>
<td>The institution “must make readily available to enrolled and prospective students...(a)(6) the names of associations, agencies, or governmental bodies that accredit, approve, or license the institution and its programs and the procedures by which documents describing that activity may be reviewed under paragraph (b).”</td>
<td>The evaluation team will examine whether institutions make available to students located in states other than the institution’s home state and receiving instruction from the institution (via distance education or correspondence education, or by other means) the contact information for filing complaints with the relevant governmental or approval body in that state in which the student is located.</td>
</tr>
</tbody>
</table>
| 602.19(a-e) | The agency must demonstrate that it has and effectively applies a set of monitoring and evaluation approaches that enable the agency to identify...institutional strengths and stability. These approaches must include...collection and analysis of key data and indicators, including fiscal information and measures of student achievement. | Address in Standard I.B, II.C, and III.D

Comprehensive evaluation teams must examine the institution’s longitudinal data on the institution’s fiscal condition, including significant increases or decreases in revenues and enrollments, and identify any team concerns about fiscal stability. Comments should be included in Standard III.D

(Standards III.D.1-15; ER 5, and ER 18)

Comprehensive evaluation teams must examine the institution’s longitudinal data on student achievement (course completion, program/certificate completion, graduation, licensure, job placement data) and identify any team concerns about stability and achievement of mission, as well as any trends that identify strengthened institutional performance.

(Standards I.B.3; and ER 11)|
Appendix F:
Clock-to-Credit-Hour Conversion Requirements

General
• Are in §668.8(k) and (l), October 29, 2010 program integrity final regulations, p. 66949-66950 (preamble: pp. 66854-66857)
• Is an exception to the credit-hour definition that applies for purposes of the title IV, HEA programs
• Modified regulations—
  − The requirements for when an institution must use clock hours for undergraduate programs, and
  − The standards for clock-to-credit-hour conversions

Clock Hour Only: not eligible for conversion - §668.8(k)(2)
• Section 668.8(k)(2) applies to degree and non-degree programs.
• The program is required to be measured in clock hours for Federal or State approval except if required for only a limited component of the program.
• Completing clock hours is a requirement for licensure to practice an occupation except if required for a limited component of the program.
• The credit hours awarded are not in compliance with the definition of a credit hour.
• The institution does not provide the clock hours that are the basis for credit hours and does not require attendance in those hours in the case of a program that might otherwise qualify to do conversion to credit hours.

No Conversion required - §668.8(k)(1)
• Unless §668.8(k)(2) applies, an undergraduate program may use credit hours as defined in §600.2 without applying the conversion formula if—
  a) The program is at least two academic years in length and provides an associate degree, a bachelor’s degree, a professional degree, or an equivalent degree as determined by the Secretary, or
  
  b) The program is a nondegree program with—
    − Each course in the program being fully acceptable toward a degree program at the institution; and
    − The institution able to demonstrate that students enroll in, and graduate from, that degree program.

• A program not meeting a) or b) must use the conversion formula or use clock hours.
New Conversion Ratios - §668.8(l)(1)
- One semester or trimester credit hour is equal to at least 37.5 clock hours.
- One quarter credit hour is equal to at least 25 clock hours.

New Conversion Ratios Exception - §668.8(l)(2)
- Is an exception to new ratios for programs that demonstrate that the credit hours meet new definition and there are no deficiencies identified by accreditor, or if applicable State approving agency
- Must base evaluation on individual coursework components of a program, e.g., classroom study versus practica or labs with little outside study
- Regardless, must meet these minimums:
  - One semester or trimester credit hour is equal to at least 30 clock hours.
  - One quarter credit hour is equal to at least 20 clock hours.

Conversion Case Study (to semester hours)
- A program with 720 clock hours consists of—
  - 5 classroom courses with 120 clock hours each, and
  - A 120 clock-hour externship with no out-of-class student work.
- The institution determines that for—
  - The first 3 classroom courses, a student generally is required to perform 40 hours of out-of-class work for each course, and
  - The last 2 classroom courses have 8 hours of out-of-class work for each course.
- Two options
  - Default option: convert only based on clock hours and ignore any out-of-class work
  - Full formula option: take into account both clock hours and out-of-class work to determine the maximum allowable credit hours
    - Four possible outcomes depending on institutional policy for method and rounding: 19.2 or 18 using Default option and 22.026 or 21 using Full Formula option
- Default option: use the default 37.5 clock hours per semester hour, ignoring the out-of-class work [conversion must be course by course]
  \[
  \frac{120}{37.5} = 3.2 \text{ semester hours per course (3, always round down course-by-course)}
  \]
- Converted program = 3.2 * 6 = 19.2 semester hours (or 3 * 6 = 18 semester hours, if rounding)

- **Full formula option**
  - Illustrates:
    - Must evaluate on individual coursework components of a program
    - Total clock hours and out-of-class student work is irrelevant
    - Must meet limitation for the minimum number of clock hours per credit hour in addition to out-of-class work
    - Excess out-of-class student work per credit hour does not carry over between courses or educational activities in a program
    - Use exact calculation including any fractions of credit hours or round down any fraction, including a fraction equal to or greater than ½
    - Rounding on individual course or educational activity, not on the total
## Full Formula Option

<table>
<thead>
<tr>
<th>Course #1 (40 hours of actual out-of-class student work)</th>
<th>In-class clock hours</th>
<th>Allowable out-of-class prep hours</th>
<th>Total clock and prep hours</th>
<th>Semester hours</th>
<th>Semester hours (rounded)</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>120</td>
<td>+</td>
<td>7.5 * 4 = 30</td>
<td>150</td>
<td>4</td>
<td>4</td>
<td>(A), (C)</td>
</tr>
<tr>
<td>Course #2 (40 hours of actual out-of-class student work)</td>
<td>120</td>
<td>+</td>
<td>7.5 * 4 = 30</td>
<td>150</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Course #3 (40 hours of actual out-of-class student work)</td>
<td>120</td>
<td>+</td>
<td>7.5 * 4 = 30</td>
<td>150</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Course #4 (8 hours of actual out-of-class student work)</td>
<td>120</td>
<td>+</td>
<td>8</td>
<td>128</td>
<td>3.413</td>
<td>3</td>
</tr>
<tr>
<td>Course #5 (8 hours of actual out-of-class student work)</td>
<td>120</td>
<td>+</td>
<td>8</td>
<td>128</td>
<td>3.413</td>
<td>3</td>
</tr>
<tr>
<td>Externship (no out-of-class student work)</td>
<td>120</td>
<td>+</td>
<td>0</td>
<td>120</td>
<td>3.2</td>
<td>3</td>
</tr>
</tbody>
</table>

Total clock hours and out-of-class student work (amount not relevant) 826

Total semester hours if no rounding 22.026

Total semester hours if rounding (must round down any fractions to ensure no overawards) 21

**NOTES:**

**Limitation:** the rules do not allow more than 7.5 hours of out-of-class prep for every 30 hours in class

(A) 120 in-class hours divided by 30 hours = 4

There are 10 hours of out-of-class prep per 30 clock hours (40/4 = 10), but cannot have more than 7.5 (4 * 7.5 = 30)

(B) 120 in-class hours divided by 30 hours = 4

There are 7.5 or fewer hours of out-of-class prep per 30 clock hours (8/4 = 2), so use actual hours of out-of-class prep (8)

**Semester hours per course**

(C) 150 total clock and prep hours divided by 37.5 = 4

(D) 128 total clock and prep hours divided by 37.5 = 3.413

(E) 120 total clock hours divided by 37.5 = 3.2
Appendix G:
Checklist for Evaluating Compliance with Federal Regulations and Commission Policies

The evaluation items detailed in this Checklist are those which fall specifically under federal regulations and related Commission policies, beyond what is articulated in the Accreditation Standards; there may be other evaluation items under ACCJC standards which address the same or similar subject matter. Evaluation teams will evaluate the institution’s compliance with standards as well as the specific Checklist elements from federal regulations and related Commission policies noted here.

General Instructions: The form should contain narrative as well as the “check-off.”

a. The team should place a check mark next to each evaluation item when it has been evaluated.
b. For each subject category (e.g., “Public Notification of an Evaluation Visit and Third Party Comment”), the team should also complete the conclusion check-off.
c. The narrative will cite to the evidence reviewed and team findings related to each of the evaluation items. If some content is discussed in detail elsewhere in the team report, the page(s) of the team report can be cited instead of repeating that portion of the narrative.
d. Any areas of deficiency from the Checklist leading to noncompliance, or areas needing improvement, should be included in the evaluation conclusions section of the team report along with any recommendations.

This Checklist will become part of the evaluation team report. Institutions may also use this form as a guide for preparing documentation for team review. It is found as an appendix in the team and institutional self-evaluation manuals.

Public Notification of an Evaluation Team Visit and Third Party Comment

Evaluation Items:

_____ The institution has made an appropriate and timely effort to solicit third party comment in advance of a comprehensive evaluation visit.

_____ The institution cooperates with the evaluation team in any necessary follow-up related to the third party comment.

_____ The institution demonstrates compliance with the Commission Policy on Rights and Responsibilities of the Commission and Member Institutions as to third party comment.

[Regulation citation: 602.23(b).]

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative (add space as needed):
Standards and Performance with Respect to Student Achievement

Evaluation Items:

_____ The institution has defined elements of student achievement performance across the institution, and has identified the expected measure of performance within each defined element. Course completion is included as one of these elements of student achievement. Other elements of student achievement performance for measurement have been determined as appropriate to the institution’s mission.

_____ The institution has defined elements of student achievement performance within each instructional program, and has identified the expected measure of performance within each defined element. The defined elements include, but are not limited to, job placement rates for program completers, and for programs in fields where licensure is required, the licensure examination passage rates for program completers.

_____ The institution-set standards for programs and across the institution are relevant to guide self-evaluation and institutional improvement; the defined elements and expected performance levels are appropriate within higher education; the results are reported regularly across the campus; and the definition of elements and results are used in program-level and institution-wide planning to evaluate how well the institution fulfills its mission, to determine needed changes, to allocating resources, and to make improvements.

_____ The institution analyzes its performance as to the institution-set standards and as to student achievement, and takes appropriate measures in areas where its performance is not at the expected level.

[Regulation citations: 602.16(a)(1)(i); 602.17(f); 602.19 (a-e).]

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative (add space as needed):
Credits, Program Length, and Tuition

Evaluation Items:

_____ Credit hour assignments and degree program lengths are within the range of good practice in higher education (in policy and procedure).

_____ The assignment of credit hours and degree program lengths is verified by the institution, and is reliable and accurate across classroom based courses, laboratory classes, distance education classes, and for courses that involve clinical practice (if applicable to the institution).

_____ Tuition is consistent across degree programs (or there is a rational basis for any program-specific tuition).

_____ Any clock hour conversions to credit hours adhere to the Department of Education’s conversion formula, both in policy and procedure, and in practice.

_____ The institution demonstrates compliance with the Commission Policy on Institutional Degrees and Credits.

[Regulation citations: 600.2 (definition of credit hour); 602.16(a)(1)(viii); 602.24(e), (f); 668.2; 668.9.]

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative (add space as needed):
Transfer Policies

Evaluation Items:

_____ Transfer policies are appropriately disclosed to students and to the public.

_____ Policies contain information about the criteria the institution uses to accept credits for transfer.

_____ The institution complies with the Commission Policy on Transfer of Credit.

[Regulation citations: 602.16(a)(1)(viii); 602.17(a)(3); 602.24(e); 668.43(a)(ii).]

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative (add space as needed):
Distance Education and Correspondence Education

Evaluation Items:

_____ The institution has policies and procedures for defining and classifying a course as offered by distance education or correspondence education, in alignment with USDE definitions.

_____ There is an accurate and consistent application of the policies and procedures for determining if a course is offered by distance education (with regular and substantive interaction with the instructor, initiated by the instructor, and online activities are included as part of a student’s grade) or correspondence education (online activities are primarily “paperwork related,” including reading posted materials, posting homework and completing examinations, and interaction with the instructor is initiated by the student as needed).

_____ The institution has appropriate means and consistently applies those means for verifying the identity of a student who participates in a distance education or correspondence education course or program, and for ensuring that student information is protected.

_____ The technology infrastructure is sufficient to maintain and sustain the distance education and correspondence education offerings.

_____ The institution demonstrates compliance with the Commission Policy on Distance Education and Correspondence Education.

[Regulation citations: 602.16(a)(1)(iv), (vi); 602.17(g); 668.38.]

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative (add space as needed):
### Student Complaints

**Evaluation Items:**

- [ ] The institution has clear policies and procedures for handling student complaints, and the current policies and procedures are accessible to students in the college catalog and online.
- [ ] The student complaint files for the previous six years (since the last comprehensive evaluation) are available; the files demonstrate accurate implementation of the complaint policies and procedures.
- [ ] The team analysis of the student complaint files identifies any issues that may be indicative of the institution’s noncompliance with any Accreditation Standards.
- [ ] The institution posts on its website the names of associations, agencies and governmental bodies that accredit, approve, or license the institution and any of its programs, and provides contact information for filing complaints with such entities.
- [ ] The institution demonstrates compliance with the Commission Policy on Representation of Accredited Status and the Policy on Student and Public Complaints Against Institutions.

[Regulation citations: 602.16(a)(1)(ix); 668.43.]

**Conclusion Check-Off (mark one):**

- [ ] The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.
- [ ] The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.
- [ ] The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

**Narrative (add space as needed):**
Institutional Disclosure and Advertising and Recruitment Materials

Evaluation Items:

_____ The institution provides accurate, timely (current), and appropriately detailed information to students and the public about its programs, locations, and policies.

_____ The institution complies with the Commission Policy on Institutional Advertising, Student Recruitment, and Representation of Accredited Status.

_____ The institution provides required information concerning its accredited status as described above in the section on Student Complaints.

[Regulation citations: 602.16(a)(1)(vii); 668.6.]

Conclusion Check-Off (mark one):

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission's requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission's requirements.

Narrative (add space as needed):
Title IV Compliance

Evaluation Items:

_____ The institution has presented evidence on the required components of the Title IV Program, including findings from any audits and program or other review activities by the USDE.

_____ The institution has addressed any issues raised by the USDE as to financial responsibility requirements, program record-keeping, etc. If issues were not timely addressed, the institution demonstrates it has the fiscal and administrative capacity to timely address issues in the future and to retain compliance with Title IV program requirements.

_____ The institution’s student loan default rates are within the acceptable range defined by the USDE. Remedial efforts have been undertaken when default rates near or meet a level outside the acceptable range.

_____ Contractual relationships of the institution to offer or receive educational, library, and support services meet the Accreditation Standards and have been approved by the Commission through substantive change if required.

_____ The institution demonstrates compliance with the Commission Policy on Contractual Relationships with Non-Regionally Accredited Organizations and the Policy on Institutional Compliance with Title IV.

[Regulation citations: 602.16(a)(1)(v); 602.16(a)(1)(x); 602.19(b); 668.5; 668.15; 668.16; 668.71 et seq.]

Conclusion Check-Off:

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements.

_____ The team has reviewed the elements of this component and has found the institution to meet the Commission’s requirements, but that follow-up is recommended.

_____ The team has reviewed the elements of this component and found the institution does not meet the Commission’s requirements.

Narrative (add space as needed):