Dr. Judy A. Bense  
President  
University of West Florida  
11000 University Parkway  
Building 10, Room 227  
Pensacola, FL 32514-5750  

Dear Dr. Bense:  

The Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) is one of only a few accrediting commissions that conducts a comprehensive review of its institutions every ten years. Most accrediting agencies conduct such reviews every 5 to 7 years. The U.S. Department of Education requires accrediting agencies that it recognizes to monitor its institutions more often to ensure that institutions having access to federal funds continue to meet the criteria of the USDOE.  

To that end, the Commission has developed a Fifth-Year Interim Report. The report has five parts:  

- Part I: Signatures Attesting to Integrity (applicable to all institutions)  
- Part II: An Abbreviated Institutional Summary Form Prepared for Commission Reviews (applicable to all institutions)  
- Part III: A Fifth-Year Compliance Certification (applicable to all institutions)  
- Part IV: An additional report (Fifth-Year Follow-Up Report) requested during the institution's previous review by the Commission (applicable to select institutions)  
- Part V: An Impact Report of the Quality Enhancement Plan (applicable to all institutions)  

An overview of the review process of the Fifth-Year Interim Report is enclosed.  

Because your institution was not requested during its previous review to submit an additional report at the fifth-year period (Fifth-Year Follow-Up Report), you will not be required to complete Part IV as described above.  

Your institution is requested to complete Parts I, II, III, and V of the enclosed Fifth-Year Interim Report Form. Parts I and II are self-explanatory. Part III is a mini-version of the Commission’s Compliance Certification and asks you to document on-going compliance.
with 14 of the 78 standards in the *Principles*. We are also enclosing "Directions and Guidelines for the Completion of Part III of the Fifth-Year Interim Report." This document provides additional guidance for completion of the Compliance Certification and also can be accessed on the Commission’s web site. Please review it before completing the Report because it explains the requirements for submitting documentation in support of compliance.

Part V is the Impact Report regarding the Quality Enhancement Plan that your institution submitted during its last reaffirmation. Directions for the completion of this section can be found on the last page of the enclosed Fifth-Year Interim Report Form.

The enclosed Fifth-Year Interim Report form as well as all other information regarding the Report can be accessed on the Commission’s Web site at http://www.sacscoc.org/FifthYear.asp.

Your institution’s report is due *March 25, 2011*, and may be submitted in print form, DVD/CD, or flash drive. Please refer to the General Directions on the Form for more specific information. When submitting your report, please send *six complete copies* to your Commission staff member. Your Report will be forwarded to the Committee on Fifth-Year Interim Reports which will convene during the meetings of SACSCOC Board of Trustees in June 2011.

We wish you the best as you complete the Fifth-Year Interim Report. If you have any questions regarding the process or the form, please feel free to contact your Commission staff member.

Sincerely,

[Signature]

Belle S. Wheelan, Ph.D.
President

BSW/CAL:th

c: Dr. Michael S. Johnson

Enclosures
THE FIFTH-YEAR INTERIM REPORT: A SUMMARY

The Fifth-Year Interim Report was developed to respond to the U.S. Department of Education's requirements (1) that accrediting bodies continuously monitor institutions to ensure compliance and (2) that accrediting bodies have a mechanism for reviewing multiple sites initiated since last reaffirmation.

Components of the Report

- Completion of the Report
  I. Signature Attesting to Integrity
  II. Abbreviated Institutional Summary Form
  III. Abbreviated Compliance Certification
  IV. Additional Report Requested (as required by COC)
  V. QEP Impact Report

- Review of off-campus sites initiated since last reaffirmation

Part III: Abbreviated Compliance Certification

Standards Reviewed

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<tr>
<td>1.</td>
<td>CR 2.8</td>
<td>Number of full-time faculty</td>
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<td>2.</td>
<td>CR 2.10</td>
<td>Student support services</td>
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<td>3.</td>
<td>CS 3.2.8</td>
<td>Qualified administrative and academic officers</td>
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<td>4.</td>
<td>CS 3.3.1.1</td>
<td>Institutional effectiveness: educational programs</td>
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<td>5.</td>
<td>CS 3.4.3</td>
<td>Admissions policies</td>
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<td>6.</td>
<td>CS 3.4.11</td>
<td>Qualified academic coordinators</td>
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<td>7.</td>
<td>CS 3.11.3</td>
<td>Physical facilities</td>
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<td>8.</td>
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<td>Student achievement</td>
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<td>9.</td>
<td>FR 4.2</td>
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<td>10.</td>
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<td>Publication of policies</td>
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<td>11.</td>
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<td>12.</td>
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<td>13.</td>
<td>FR 4.6</td>
<td>Recruitment materials</td>
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<td>14.</td>
<td>FR 4.7/CS 3.10.3</td>
<td>Title IV program responsibilities/financial aid audits</td>
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- **Evaluators**: Committee to Review Fifth-Year Interim Reports composed of experienced off-site committee reviewers who conduct the review similar to that of the evaluation of the Compliance Certification at the time of reaffirmation. Four committees review approximately 10 institutions. Each of the four committees has five members: Coordinator, IE evaluator, student services evaluator, and two academic program evaluators.

- **Options of the Evaluators**: (1) No referral or (2) Referral to a C & R Committee *
- **Options of C & R following referral at the designated meeting**: (1) No additional report, (2) Request monitoring report which starts the two-year limited monitoring period, (3) Recommend placing the institution on a sanction, with a monitoring report, and w/without a visit to campus.

Part IV: Additional Report/Fifth-Year Follow Up

Report addresses issues identified at the completion of the institution’s last visiting committee review that require monitoring for verification of continued compliance with a standard. Submission by request of a previous C & R; not applicable to all institutions.

* C & R Committee refers to a Committee on Compliance & Reports, one of four standing committees of the Board of Trustees that reviews institutional accreditation cases and makes recommendations to the full Board of Trustees.
• **Evaluators:** C & R Committee composed of elected members of the Board of Trustees.

• **Options of the Evaluators:** (1) No additional report, (2) Request monitoring report which continues the two-year limited monitoring period, (3) Recommend placing the institution on a sanction, with a monitoring report, and w/without a visit to campus.

**Part V: QEP Impact Report**

The QEP Impact Report asks institutions to address the following as relates to the QEP developed during its previous reaffirmation: (1) the title and a brief description of the institution’s QEP as initially presented, (2) a succinct list of the initial goals and intended outcomes of the QEP, (3) a discussion of changes made to the QEP and the reasons from making those changes, and (4) a description of the QEP’s direct impact on student learning, including the achievement of goals and outcomes as outlined in item three above, and unanticipated outcomes of the QEP, if any.

• **Evaluators:** Committee to Review Fifth-Year Interim Reports (see composition under Part III above)

• **Options of the Evaluators:**
  1. Accept with Comment. The institution has adequately documented the implementation of its Plan regardless of changes needed throughout its delivery, provided adequate documentation of the assessment of the QEP’s impact on student learning, and demonstrated sustained support for the project. No additional report required.
  2. Refer to C & R for review. The institution did not document the implementation of its Plan, the assessment of the QEP’s impact on student learning, and the sustained support for the project. Institution is requested to provide an additional report in 12 months that documents progress in modifying and implementing the QEP. Report is forwarded to C & R for action that can include additional monitoring or negative action.

**Review of Off-campus Sites initiated since Last Reaffirmation**

An institution is requested to undergo a COC committee visit to previously unvisited off-campus site(s) that were initiated since the institution’s last reaffirmation and where students can obtain 50% or more of coursework toward the completion of an educational program. The areas of evaluation as applicable to the off-campus site(s) include: (1) faculty qualifications and access, (2) qualifications of administrative and academic officials leading activities and programs at the site(s), (3) Student services, (4) library/learning resource accessibility and sufficiency, (5) physical facilities supporting the programs, and (6) student learning outcomes compared to similar programs offered on the main campus.

• **Evaluators:** C & R Committee composed of elected members of the Board of Trustees.

• **Options of the Evaluators:** (1) Continue accreditation, no additional report, (2) Continue accreditation with a monitoring report, (3) Recommend placing the institution on a sanction, with a monitoring report, and w/without a visit to campus.

**Institutional Preparation for the Completion of the Report**

• Continuously update your previous compliance certification.

• Provide narrative that supports compliance and explains the use of the selected documentation.

• Document, document, and document.

• Give examples when appropriate.

• Use tables effectively to support your determination of compliance.

• Respond to the standard referenced not to other standards that are not part of the report.

**Presentation of Reports**

Reports may be submitted in print form, DVD/CD, or thumb drive. Ensure that your report is user friendly with all info easily accessible to evaluators.

**Note:** Refer to [http://www.saccoc.org/FifthYear.asp](http://www.saccoc.org/FifthYear.asp) for additional information.
The Commission on Colleges  
Southern Association of Colleges and Schools

THE FIFTH-YEAR INTERIM REPORT  
(Revised October 2009)

Name of Institution:

Address of the Institution:

Name, title, contact numbers of person(s) preparing the report:

The Fifth-Year Interim Report is divided into five parts:

- **Part I: Signatures Attesting to Integrity** *(applicable to all institutions).* Requests that the chief executive officer and accreditation liaison attest to the accuracy of institutional assessment and documentation supporting that assessment.

- **Part II: Abbreviated Institutional Summary Form Prepared for Commission Reviews** *(applicable to all institutions).* Requests that the institution complete the abbreviated "Institutional Summary Form Prepared for Commission Reviews."

- **Part III: Fifth-Year Compliance Certification** *(applicable to all institutions).* Monitors continued compliance with identified Core Requirements, Comprehensive Standards, and Federal Requirements at the decennial interval.

- **Part IV: Additional Report** *(applicable to select institutions).* Addresses issues identified in an action letter following a recent review of the institution. If applicable, issues are identified in an attached letter.

- **Part V: Impact Report of the Quality Enhancement Plan** *(applicable to all institutions reaffirmed since 2004 using the Principles of Accreditation).*

An institution may also be requested to host an off-site committee charged to review new, but unvisited, off-campus sites initiated since the institution's previous reaffirmation. An institution will be notified of this at the time it receives its letter from the Commission President regarding the Fifth-Year Interim Report.
General Directions for the Fifth-Year Interim Report

In addition to the general directions below that are applicable to all Parts of the Fifth-Year Interim Report, please also follow the directions specific for each Part. Submit six copies to your assigned Commission staff member.

- Materials may be submitted in print form or electronically. If an audit has been requested, it must be submitted in print form.

- If print documents are submitted, copy all documents front and back, double space the copy, and use no less than a 10 point font. Staple or soft bind the document. Do not submit in a three-ring binder.

- If electronic documents are submitted, copy the report and all attachments onto a DVD, CD, or flash/thumb drive. Provide the name of the person who can be contacted if the readers have problems accessing the information. Provide one print copy of the response without the attachments.
  
  Each device smaller than 4" x 4" should be submitted in a paper or plastic envelope not smaller than 4" x 4" and the envelope should be labeled with the name of the institution, the title of the report, and the list of the document contents. The device should be labeled with the name of the institution and the title of the report.
  
  Each electronic device larger than 4" x 4" should be in a paper or plastic envelope and clearly labeled with the name of the institution, the title of the report, and the list of document contents. The device should be labeled with the name of the institution and the title of the report.
  
  Be sure to check the electronic device before mailing it to the Commission office to ensure that all intended documents are included.

- Reread the report before submission and eliminate all narrative that is not relevant to the focus of the report.

- PARTS I, II, III and V should be combined into one document or into one DVD/CD or flash/thumb drive. Provide a separate print document or DVD/CD or flash/thumb drive for PART IV. SIX COPIES SHOULD BE SUBMITTED with Parts I, II, III and V included and six copies should be submitted with Part IV included, if requested.
Part I: Signatures Attesting to Integrity
(Applicable to all institutions)

Directions: Please include Part I with Parts II, III, and V on the same electronic device or with the same print document. It should not be combined with Part IV.

By signing below, we attest that ____________ (name of institution) has conducted an honest assessment of compliance and has provided complete and accurate disclosure of timely information regarding compliance with the identified Core Requirements, Comprehensive Standards, and Federal Requirements of the Commission on Colleges.

Date of Submission: ________________

Accreditation Liaison

Name of Accreditation Liaison

Signature

Chief Executive Officer

Name of Chief Executive Officer

Signature
Part II: The Abbreviated “Institutional Summary Form Prepared for Commission Reviews”
(Applicable to all institutions)

Directions: Please include Part II with Parts I, III, and V on the same electronic device or with the same print document. It should not be combined with Part IV.

History and Characteristics

Provide a brief history of the institution, a description of its current mission, an indication of its geographic service area, and a description of the composition of the student population. Include a description of any unusual or distinctive features of the institution and a description of the admissions policies (open, selective, etc.).

List of Degrees

List all degrees currently offered (A.S., B.A., B.S., M.A., Ph.D., for examples) and the majors or concentrations within those degrees, as well as all certificates and diplomas.

Locations and Distance Education

1. List all new off-campus sites established since your previous reaffirmation where a student can be awarded a degree, certificate, or diploma at the site or where a student can obtain 50 percent or more of credits toward the educational program.

2. List all locations (country, state, and city) where coursework toward a degree, diploma, or certificate can be obtained primarily through traditional classroom instruction. For each site, indicate the partial or complete degree offered and, for each degree, certificate, or diploma, whether a student can obtain 50 percent of credits toward any of the educational programs.

3. Provide a brief description of distance education credit offerings that can be obtained primarily through electronic means and indicate where the students are located. Indicate any degree or certificate programs that can be completed primarily through electronic means. Please limit this brief description to one-half page.
Part III: The Fifth-Year Compliance Certification  
(Applicable to all institutions)

Directions:

(1) Please access the document “Directions for Completion of Part III of the Fifth-Year Interim Report” for directions and guidelines for completing Part III.

(2) Please include Part III with Parts I, II, and V on the same electronic device or with the same print document. It should not be combined with Part IV.

(3) For each of Core Requirement, Comprehensive Standard, and Federal Requirement listed below, the institution should make a determination regarding compliance, place an “X” in the appropriate box, explain the reason for the institution’s findings, and provide documentation in support of its determination.

Compliance: The institution found that it meets the requirement and provides a convincing argument in support of its determination and a list of documents (or electronic access to the documents) demonstrating compliance.

Non-Compliance: The institution found that it does not meet the requirement and provides the reason for checking non-compliance, a description of plans to comply, and a list of documents that will be used to demonstrate future compliance.

Note: (1) Unless an institution is required to submit financial documents requested in Part IV, no additional financial information is required due to the annual submission of Financial Institutional Profiles. (2) The standards identified in this part of the report reflect the criteria of the U.S. Department of Education but do not necessarily include all the Federal Requirements listed in Section 4 of the Principles of Accreditation.

1. The number of full-time faculty members is adequate to support the mission of the institution and to ensure the quality and integrity of its academic programs. (Core Requirement 2.8)

   ___ Compliance   ___ Non-Compliance

   Narrative:

2. The institution provides student support programs, services, and activities consistent with its mission. (Core Requirement 2.10)

   ___ Compliance   ___ Non-Compliance

   Narrative:
3. The institution has qualified administrative and academic officers with the experience, competence, and capacity to lead the institution. (Comprehensive Standard 3.2.8)

___ Compliance    ___ Non-Compliance

Narrative:

4. The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in the following area: (Comprehensive Standard 3.3.1)

3.3.1.1 Educational programs, to include student learning outcomes

___ Compliance    ___ Non-Compliance

Narrative:

5. The institution publishes admissions policies that are consistent with its mission. (Comprehensive Standard 3.4.3)

___ Compliance    ___ Non-Compliance

Narrative:

6. For each major in a degree program, the institution assigns responsibility for program coordination, as well as for curriculum development and review, to persons academically qualified in the field. In those degree programs for which the institution does not identify a major, this requirement applies to a curricular area or concentration. (Comprehensive Standard 3.4.11)

___ Compliance    ___ Non-Compliance

Narrative:

7. The institution operates and maintains physical facilities, both on and off campus, that appropriately serve the needs of the institution's educational programs, support services, and other mission-related activities. (Comprehensive Standard 3.11.3)

___ Compliance    ___ Non-Compliance

Narrative:

8. The institution evaluates success with respect to student achievement including, as appropriate, consideration of course completion, State licensing examination, and job placement rates. (Federal Requirement 4.1)

___ Compliance    ___ Non-Compliance

Narrative:
9. The institution's curriculum is directly related and appropriate to the purpose and goals of the institution and the diplomas, certificates, or degrees awarded. *(Federal Requirement 4.2)*

 ___ Compliance  ___ Non-Compliance

Narrative:

10. The institution makes available to students and the public current academic calendars, grading policies, and refund policies. *(Federal Requirement 4.3)*

 ___ Compliance  ___ Non-Compliance

Narrative:

11. Program length is appropriate for each of the institution's educational programs. *(Federal Requirement 4.4)*

 ___ Compliance  ___ Non-Compliance

Narrative:

12. The institution has adequate procedures for addressing written student complaints and is responsible for demonstrating that it follows those procedures when resolving student complaints. *(Federal Requirement 4.5)*

 ___ Compliance  ___ Non-Compliance

Narrative:

13. Recruitment materials and presentations accurately represent the institution's practices and policies. *(Federal Requirement 4.6)*

 ___ Compliance  ___ Non-Compliance

Narrative:

14. The institution is in compliance with its program responsibilities under Title IV of the 1998 Higher Education Amendments. *(Federal Requirement 4.7)* The institution audits financial aid programs as required by federal and state regulations. *(Comprehensive Standard 3.10.3)*

 ___ Compliance  ___ Non-Compliance

Narrative:
Part IV: Additional Report
(Not applicable to all institutions)

Directions: Please provide six copies of Part IV of the Fifth-Year Interim Report regardless whether the document is submitted in print or electronic format. It should not be combined with another Part of the Fifth-Year Interim Report. Entitle it "Additional Report" and submit it by the date indicated in the letter from the President of SACS Commission on Colleges.

Definition: An Additional Report addresses an institution’s continued compliance with standards and requirements specified in a letter by the President of the Commission normally at the time of an institution’s last review. (If applicable, a copy of the letter is enclosed.)

Audience: The Additional Report is reviewed by SACSCOC Board of Trustees and is subject to the review procedures of the Commission’s standing committees, including the continuation of a monitoring period, the imposition of a sanction, or a change of accreditation status.

Elements: Structure the response so that it addresses the standards in the order that they appeared in the report. Tabs should separate each response to a cited standard.

For each accreditation standard noted in the letter, (1) restate the number of the Core Requirement, Comprehensive Standard, or Federal Requirement of the Principles of Accreditation and the recommendation exactly as it appeared in the visiting committee report; (2) provide a brief history of previous responses to the standard, if more than a first response (to include an accurate summary of the original concerns of the visiting committee; (3) cite verbatim the current request of the Commission (reference notification letter from the President of the Commission); and (4) prepare a response to the recommendation to include documentation supporting ongoing compliance.

When doing so, please adhere to the following guidelines:

- **Provide a concise, clear, and complete report.** Ensure that documentation is appropriate for demonstrating fulfillment of the requirement. Specify actions that have been taken and document their completion.
- **Ensure that your narrative explains the use of the documentation and how the documentation supports compliance.**
- **When possible, excerpt passages from text and incorporate the narrative into the report instead of sending an entire document as a reference.** Provide definitive evidence, not documents that only address the process.
- **Specify actions that have been taken and provide documentation that such actions have been completed.**
- **When possible and appropriate, provide samples of evidence of compliance rather than all documents pertaining to all activities associated with compliance.**
Part V: The Impact Report of the Quality Enhancement Plan
(Applicable to institutions that were previously reviewed under the Principles of Accreditation)

Directions: Please include Part V with Parts I, II, and III on the same electronic device or with the same print document. It should not be combined with Part IV. Entitle it “QEP Impact Report.”

Definition: The Impact Report, submitted five years prior to the institution’s next decennial review, is a report demonstrating the extent to which the QEP has affected outcomes related to student learning. It is part of the Institution’s Fifth-Year Interim Report.

Audience: The Impact Report is reviewed by the Committee on Fifth-Year Interim Reports.

Elements:
The following elements should be addressed in the narrative:

1. the title and a brief description of the institution’s Quality Enhancement Plan as initially presented;

2. a succinct list of the initial goals and intended outcomes of the QEP;

3. a discussion of changes made to the QEP and the reasons for making those changes; and

4. a description of the QEP’s direct impact on student learning including the achievement of goals and outcomes as outlined in item three above, and unanticipated outcomes of the QEP, if any.

The report should not exceed ten pages, including narrative and appendices.
Directions and Guidelines for Completion of Part III of the Fifth-Year Interim Report

Part III: The Fifth-Year Compliance Certification

CONDUCTING THE COMPLIANCE REVIEW
AND DOCUMENTING COMPLIANCE

1. Refer to the Handbook for Institutions Seeking Reaffirmation of Accreditation for (1) conducting the compliance review, documenting compliance, (3) evaluating the evidence supporting compliance, and (4) making the case for compliance (pp 17-25).


2. See the attached addendum for page references in the Resource Manual for the Principles of Accreditation for each of the 14 standards that are part of the Fifth-Year Interim Report.


3. Reminders:

   - Provide a concise, clear, and complete report. Ensure that documentation is appropriate for demonstrating fulfillment of the requirement. Specify actions that have been taken and document completion.

   - Ensure that your narrative explains the use of the documentation and how the documentation supports compliance.

   - Provide definitive evidence, not documents that only address the process.

   - Specify actions that have been taken and provide documentation that such actions have been completed.

   - When possible and appropriate, provide samples of evidence of compliance rather than all documents pertaining to all activities associated with compliance. Sampling should include a representation of programs and services in accord with an institution’s mission and should explain the method used for the sample selection.

   - When a requirement requests that the institution have a policy, provide examples of policy implementation.

   - Integrate the evaluation and analysis of compliance for all distance learning programs and off-site programs and services described in Part II of your Report. Focus particularly on CR 2.8, CR 2.10, CS 3.3.1.1, CS 3.4.11, and FR 4.2 – 4.6.
REPORTING AND COMMUNICATION FORMAT

- Materials may be submitted in print form, on DVD/CD, flash/thumb drive. If an audit has been requested, it must be submitted in print form only.

- If print documents are submitted, copy all documents front and back, double space the copy, and use no less than a 10 point font. Do not submit documents in a three-ring binder; staple or soft bind the document.

- If electronic documents are submitted, all documents must be included on the electronic device. Each device smaller than 4”x 4” should be submitted in a paper or plastic envelope not smaller than 4”x 4” and the envelope should be labeled with the name of the institution, the title of the report, and the list of document contents. The device itself should be labeled with the name of the institution and the name of the report. Submit the name and contact numbers of an individual who can be contacted if readers have problems accessing the documents on the electronic devices.

Be sure to check the electronic device before mailing it to the Commission office to ensure that all intended documents are included. It also would be helpful to field test access to the electronic documents by individuals unfamiliar with the institution.

- When possible, excerpt passages from text and incorporate the narrative into the report instead of sending an entire document. Provide definitive evidence, not documents that only address the process.

- Reread the report before submission and eliminate all narrative that is not relevant to the focus of the report.

- Provide SIX copies of the Report by the date designated in your letter from the Commission President.
ADDENDUM A

REFERENCES TO PAGE NUMBERS IN THE RESOURCE MANUAL
THAT ADDRESS EACH OF THE 14 STANDARDS
IN THE FIFTH-YEAR INTERIM REPORT

1. The number of full-time faculty members is adequate to support the mission of the institution and to ensure the quality and integrity of its academic programs. (Core Requirement 2.8)

2. The institution provides student support programs, services, and activities consistent with its mission. (Core Requirement 2.10)

3. The institution has qualified administrative and academic officers with the experience, competence, and capacity to lead the institution. (Comprehensive Standard 3.2.8)

4. The institution identifies expected outcomes, assesses the extent to which it achieves these outcomes, and provides evidence of improvement based on analysis of the results in the following area: (part of Comprehensive Standard 3.3.1)
   3.3.1.1 educational programs, to include student learning outcomes
   See pages 34-35 of the Resource Manual. The current standard is a revision of the former Comprehensive Standard 3.3.1.

5. The institution publishes admissions policies that are consistent with its mission.
   (Comprehensive Standard 3.4.3)

6. For each major in a degree program, the institution assigns responsibility for program coordination, as well as for curriculum development and review, to persons academically qualified in the field. In those degree programs for which the institution does not identify a major, this requirement applies to a curricular area or concentration. (Comprehensive Standard 3.4.11)
   See page 48 of the Resource Manual. The current standard is the same as the old Comprehensive Standard 3.4.13.

7. The institution operates and maintains physical facilities, both on and off campus, that appropriately serve the needs of the institution’s educational programs, support services, and other mission-related activities. (Comprehensive Standard 3.11.3)
   See pages 67-68 of the Resource Manual. The current standard is the same as the old Comprehensive Standard 3.10.7

8. The institution evaluates success with respect to student achievement including, as appropriate, consideration of course completion, State licensing examination, and job placement rates. (Federal Requirement 4.1)
9. The institution’s curriculum is directly related and appropriate to the purpose and goals of the institution and the diplomas, certificates, or degrees awarded. (Federal Requirement 4.2)

10. The institution makes available to students and the public current academic calendars, grading policies, and refund policies. (Federal Requirement 4.3)

11. Program length is appropriate for each of the institution’s educational programs. (Federal Requirement 4.4)

12. The institution has adequate procedures for addressing written student complaints and is responsible for demonstrating that it follows those procedures when resolving student complaints. (Federal Requirement 4.5)
See page 70 of the Resource Manual. Please include examples of the application of the procedures—very important.

13. Recruitment materials and presentations accurately represent the institution’s practices and policies. (Federal Requirement 4.6)

14. The institution is in compliance with its program responsibilities under Title IV of the 1998 Higher Education Amendments. (Federal Requirement 4.7) The institution audits financial aid programs as required by federal and state regulations. (Comprehensive Standard 3.10.3) (CS 3.10.3 requires the audits; FR 4.7 requires compliance. See Addendum B)
ADDENDUM B

FIFTH-YEAR INTERIM REPORT SUPPORT
FOR COMPREHENSIVE STANDARD 3.10.3
AND FEDERAL REQUIREMENT 4.7

COMPREHENSIVE STANDARD 3.10.3

The institution audits financial aid programs as required by federal and state regulations.

What types of documentation, or patterns of evidence, would document compliance with the standard?

- Most recent external audit of federal financial aid programs.
- Most recent external audit of state financial aid programs.
- If public, documentation from auditor indicating audit schedule and frequency.
- Recent copies of correspondence received from the U.S. Department of Education related to delays in receiving, or not receiving, federal awards audit information.

FEDERAL REQUIREMENT 4.7

The institution is in compliance with its program responsibilities under Title IV of the 1998 Higher Education Amendments.

What types of documentation, or patterns of evidence, would document compliance with the standard?

- Most recent OMB A-133 financial aid audit report
- Institutional response to findings in the financial aid audit report
- Copies of recent correspondence from the U.S. Department of Education
- Copies of institutional response to U.S. Department of Education correspondence
- Details regarding negotiated settlement agreements for the payoff of any fines or monies owed in connection with program or fiscal audits
- Copies of any reports on compliance from the U.S. Department of Education
PROCESS FOR THE REVIEW OF THE QEP IMPACT REPORT

What the institution is requested to address in its QEP Impact Report

Institutions submitting a QEP Impact Report were asked to address the following elements in their narrative.

1. the title and a brief description of the institution’s Quality Enhancement Plan as initially presented;

2. a succinct list of the initial goals and intended outcomes of the QEP;

3. a discussion of significant changes made to the QEP and the reasons for making those changes; and

4. a description of the QEP’s direct impact on student learning including the achievement of goals and outcomes as outlined in item three above, and unanticipated outcomes of the QEP, if any.

Review Procedure by the Committee on Fifth-Year Interim Reports

The Committee on Fifth-Year Interim Reports (Group E of the COC standing committees) reviews the QEP Impact Report. Staff members do not provide a memo that would assess the report; therefore, the first review of the Impact Report is with Group E—composed of non commission members who do not recommend action on the accreditation status of an institution, including the imposition of sanctions.

Options for the Fifth-Year Interim Report Committee

Accept with comment:

The institution adequately documented the implementation of its Plan regardless of the changes needed throughout its delivery, provided adequate documentation of the assessment of the QEP’s impact on student learning, and demonstrated sustained support for the project.

No additional report required.

The Committee may also indicate whether it finds that an institution’s QEP was particularly strong in areas such as its significance and impact on student learning; the outstanding support of the institution’s administrative leadership, faculty, and students throughout its implementation; or any other elements of excellence.

Refer to C & R for review

The institution did not document the implementation of its Plan, the assessment of the QEP’s impact on student learning, and the sustained support for the project.

Institution is requested to provide an additional report in 12 months that documents progress in modifying and implementing its QEP. This report will be forwarded to C & R who can either monitor the institution through additional reports or may take other action.

Approved: Board of Trustees, June 2009
PROCESS FOR THE REVIEW OF THE QEP IMPACT REPORT

What the institution is requested to address in its QEP Impact Report

Institutions submitting a QEP Impact Report were asked to address the following elements in their narrative.

1. the title and a brief description of the institution's Quality Enhancement Plan as initially presented;
2. a succinct list of the initial goals and intended outcomes of the QEP;
3. a discussion of significant changes made to the QEP and the reasons for making those changes; and
4. a description of the QEP's direct impact on student learning including the achievement of goals and outcomes as outlined in item three above, and unanticipated outcomes of the QEP, if any.

Review Procedure by the Committee on Fifth-Year Interim Reports

The Committee on Fifth-Year Interim Reports (Group E of the COC standing committees) reviews the QEP Impact Report. Staff members do not provide a memo that would assess the report; therefore, the first review of the Impact Report is with Group E—composed of non-commission members who do not recommend action on the accreditation status of an institution, including the imposition of sanctions.

Options for the Fifth-Year Interim Report Committee

Accept with comment:

The institution adequately documented the implementation of its Plan regardless of the changes needed throughout its delivery, provided adequate documentation of the assessment of the QEP's impact on student learning, and demonstrated sustained support for the project.

No additional report required.

The Committee may also indicate whether it finds that an Institution's QEP was particularly strong in areas such as its significance and impact on student learning; the outstanding support of the Institution's administrative leadership, faculty, and students throughout its implementation; or any other elements of excellence.

Refer to C & R for review

The institution did not document the implementation of its Plan, the assessment of the QEP's impact on student learning, and the sustained support for the project.

Institution is requested to provide an additional report in 12 months that documents progress in modifying and implementing its QEP. This report will be forwarded to C & R who can either monitor the institution through additional reports or may take other action.

Approved: Board of Trustees, June 2009