Check Sheets

for Accreditation Visiting Teams (Registered Apprenticeship Schools and National ERISA Training Institutes)

Standard Criteria
from the
Handbook of Accreditation

~ 2024 Edition ~

Changes made to the *Handbook of Accreditation* by the membership from the previous version are also highlighted in blue here.

Changes made to the Handbook of Accreditation as a result of mandates of the U.S. Department of Education from the previous version are also highlighted in yellow here.

(January 12, 2024)

INSTRUCTIONS

General:

The Conditions and Criteria in the following check sheets are found in the *Handbook of Accreditation.*

There are some items on the check sheets, however, that are informational or procedural in nature and are to be completed only by members of accreditation visiting teams. These items specify that they are to be used only by visiting team members and will be either highlighted or will include special instructions for visiting teams.

The numbering system used in this document corresponds with both *Handbook of Accreditation* (blue column on the left, when necessary, which is abbreviated as "**HB**"), and the Council's software for accreditation visiting teams (in the main body of the check sheets).

Throughout the check sheets, marking a YES response indicates the institution IS in compliance with a criterion. Marking a NO response indicates the institution IS NOT in compliance with a criterion and requires that finding(s) of non-compliance be written by the visiting team.

Multiple-Part Criteria: Sample Finding of Non-Compliance

Below is an example of a multi-part criterion. When visiting teams check NO to the contingent criterion, related criteria are automatically filled in by the software. The finding written by the team must follow the format described below.

Even if only one program fails to have an occupational advisory committee appointed, the Standard 2 Composite folder in the software reflects this…

Standard 2 Composite Criteria	YES	NO	N/A
B. Occupational Advisory Committee Activities			
1. Occupational advisory committees are appointed for each program to ensure that desirable, relevant, and current practices of each occupation are being taught. **VISITING TEAMS: If NO is checked, leave criteria 2-9 blank and resume with criterion 10. Write one finding of non-compliance that specifies BOTH the requirement to appoint a committee for each program AND each criterion 2-9. (See instructions page.)**		✓	MULTI-PART CRITERIA
Each occupational advisory committee complies with the following requirements: 2. Consists of a minimum of three members external to the institution			
3. Represents expertise in the occupational field(s) for which the program prepares students			
4. Represents each service area covered by the program at each meeting (all locations)			
5. Has at least three external members who meet these criteria present at each Meeting			
6. Meets at least twice annually			
7. Conducts at least one face-to-face meeting with at least two of the three required external members physically present (one external member may be virtually present)			
8. Ensures that no fewer than three months separate each official committee meeting			
9. Follows an agenda and maintains typed minutes to document its activities, recommendations, meeting attendance, and demographic information for each member *NOTE: Additional guidance regarding occupational advisory committees is provided in the Policies and Rules of the Commission.*			

A finding of non-compliance must be provided in the Standard Two – Composite folder as follows:

The team finds that the institution failed to appoint an occupational advisory committee for the ***Practical Nursing*** *program. The institution must appoint an advisory committee for the Practical Nursing program at the main campus of the institution to ensure that desirable, relevant, and current practices of the occupation are being taught. Furthermore, the advisory committee appointed for this program must:*

- Consist of a minimum of three members external to the institution;
- Represent expertise in the occupational field(s) for which the program prepares students;
- Represent each service area covered by the program at each meeting (all locations);
- Have at least three external members who meet these criteria present at each meeting;
- Meet at least twice annually;
- Conduct at least one face-to-face meeting with at least two of the three required external members physically present (one external member may be virtually present);
- Ensure that no fewer than three months separate each official committee meeting;
- Follow an agenda and maintain typed minutes to document its activities, recommendations, meeting attendance, and demographic information for each member.

Additionally, the committee must review, at least annually, the appropriateness of the type of instruction (such as lecture, laboratory, work-based instruction, and/or mode of delivery) offered within each program to assure that students gain competency with specific skills required for successful completion of the program.

Notice that in the sample finding provided above, the program that fails to comply with the advisory committee criteria is specified. If more than one program fails to comply, the finding must list each of those programs. Also, the finding includes all criteria related to occupational advisory committees that must be met (criteria 2 through 9 on the previous page).

STANDARDS WHERE MULTI-PART CRITERIA APPEAR

This version of the check sheets contains 18 multi-part criteria in the following standards:

Standard One – Institutional Mission
Standard Two – Educational Programs
Standard Three – Program Outcomes
Standard Four – Strategic Planning
Standard Five – Educational Resources
Standard Six – Institutional Infrastructure
Standard Seven – Financial Resources
Standard Ten – Student Services and Activities

Council on Occupational Education
CONDITIONS CHECK SHEET
RAS/NETI Version – 2024 Edition

CONDITIONS	YES	NO	N/A
1. The institution continues to demonstrate that it satisfies each of the eligibility requirements for Candidate for Accreditation. (See *Handbook of Accreditation*, pgs. 7-8)			
2. The institution conducts its affairs with acceptable standards of honesty and integrity. (See *Handbook of Accreditation*, pg. 29*)*			
3. The institution meets all lawful obligations imposed by state and federal agencies. (See *Handbook of Accreditation*, pg. 29*)*			
4. The institution has notified the Commission of any individual affiliated with the institution who has been debarred by a government agency or another accrediting agency or was an owner , an administrator, or a governing-board member of a COE-affiliated institution that was denied accreditation, was dropped from accreditation, or closed without providing a teach-out or refunds to currently enrolled students. (See *Handbook of Accreditation*, pgs. 29-30*)*			
5. The institution occupies its own physical facilities and is not co-located with another institution. (See *Handbook of Accreditation*, pg. 10*)*			
6. The institution maintains a permanent accreditation file which contains items set forth in the Commission conditions. (See *Handbook of Accreditation*, pg. 24)			
7. (If required to operate.) The institution has a current license for the main campus. (See *Handbook of Accreditation*, pg. 8*)*			
Item 8: This item is to be completed by Visiting Teams during accreditation visits.			
8. List ID numbers and expiration dates of licenses for all campuses:			
9. The on-site administrator or other full-time employee at the main campus attended the Commission-sponsored workshops, including those for preparing the Self-Study Report, submitting the Annual Report, and, for initial accreditation, the Candidate Academy, within six to eighteen months before hosting the visiting accreditation team. (See *Handbook of Accreditation*, pg. 11)			
10. For initial accreditation or reaffirmation of accreditation, the institution has posted a notice on the home page of the institution's website and on at least one social media platform until accreditation is granted or reaffirmed. This notice must be placed at least sixty (60) days prior to hosting the accreditation visit and must state that the institution is applying for initial accreditation or reaffirmation of accreditation with the Commission of the Council on Occupational Education. (See *Handbook of Accreditation*, pgs. 49-50*)*			
Item 11: This item is to be completed by Visiting Teams during accreditation visits.			
11. Date notice was published:			
12. The institution has submitted an evaluation of Standards form from one of its occupational advisory committees within 12 months of the institution's scheduled visit, but prior to the preliminary visit. (See *Handbook of Accreditation*, pg. 49*)*			
13. The institution has informed the Commission of all planned and unplanned substantive changes. (See *Handbook of Accreditation*, pgs. 31-34*)*			
14. Innovative or experimental programs operated at variance with the standards have received Commission concurrence prior to implementation. (See *Handbook of Accreditation*, pg. 6*)*			
15. Documents the institution has filed with the Commission accurately represent the status of the institution. (NOTE: If this statement is checked "NO", documentation which demonstrates the institution's misrepresentation must be submitted with the team report.) (See *Handbook of Accreditation*, pgs. 24-26*)*			
Accredited Institutions Only 16. The institution's use of the accreditation seal complies with Commission conditions. (See *Handbook of Accreditation*, pg. 25)			
17. The institution adheres to the Commission's condition on the monitoring of institutional growth and has notified the Commission of increases in total Full-Time Equivalent (FTE) that equal or exceed 25% of the established baseline. (See *Handbook of Accreditation*, pg. 44)			
18. Student recruitment activities used by the institution are truthful and avoid any false or misleading impressions of the institution, its programs and services, or employment, and are in compliance with all other Commission conditions governing recruitment. (See *Handbook of Accreditation*, pgs. 46)			

CONDITIONS CHECK SHEET:
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CONDITIONS (continued)	YES	NO	N/A
19. Media used by the institution for advertising purposes is truthful and presented with dignity to avoid any false or misleading impressions of the institution, its programs and services, or employment, and are in compliance with all other Commission conditions governing advertising. (See *Handbook of Accreditation*, pgs. 45-46)			
20. A website and other official informational documents which are made available through various media (hard copy or online) to provide the information specified in the *Handbook of Accreditation* must be readily available to students, prospective students, and other constituents. (See *Handbook of Accreditation*, pg. 89-90)			
21. If the institution employed a consultant for the purpose of assisting in the accreditation process, it has submitted a copy of the consultant's resume to the Council within seven days after employment was secured, and it can demonstrate that the terms of the consultant's contract meet Commission conditions stated in the Handbook of Accreditation. (See *Handbook of Accreditation*, pg. 15)			
22. The role of contractors hired by candidate/accredited institutions (if any) must exclude the authority to make official decisions for the institution or to serve in the role of accreditation liaison officer for the institution. (See *Handbook of Accreditation*, pg. 46-47)			
23. If the institution participates in Title IV Financial Aid programs, it does not contract more than 25% of the instruction of one or more of its programs with an external entity. (See *Handbook of Accreditation*, pg. 46-47)			
24. Clear indication must exist that the faculty and staff were responsible for preparing, revising and editing any documents required in the accreditation process. (See *Handbook of Accreditation*, pg. 15)			
25. The institution has named an accreditation liaison officer who is a staff member located at the main campus. (See *Handbook of Accreditation*, pg. 23)			
Status with Other Agencies: A "YES" response for statements #1-8 signifies that the institution is in compliance with the Commission's Conditions.			
1. The institution is not the subject of an interim action by a state or federal agency potentially leading to the suspension, revocation, withdrawal, or termination of the institution's legal authority to provide postsecondary education in any state in which it operates. (See *Handbook of Accreditation*, pg. 48)			
2. The institution has not had its state/federal agency approval suspended, revoked, withdrawn, or terminated, even if the required due process procedures have not been completed within any state in which it operates. (See *Handbook of Accreditation*, pg. 48)			
3. The institution has not voluntarily withdrawn its candidacy or accreditation while not in good standing from another recognized accrediting agency besides COE. (See *Handbook of Accreditation*, pg. 48)			
4. The institution has not had its candidacy or accreditation withdrawn or been placed on public probation by another recognized accrediting agency besides COE. (See *Handbook of Accreditation*, pg. 48)			
5. The institution is not the subject of an interim action by another recognized accrediting agency besides COE potentially leading to the suspension, revocation, or withdrawal of candidacy or accreditation. (See *Handbook of Accreditation*, pg. 48)			
6. The institution has not been notified of the loss of another recognized accrediting agency besides COE's accreditation even if the due process procedures have not been completed. (See *Handbook of Accreditation*, pg. 48)			
7. The institution describes itself in identical terms with regard to identity (i.e., main campus, branch campus, branch campus to main campus relationship), mission, governance, programs, degrees, diplomas, certificates, personnel, finances, and constituents to all federal, state, and other agencies, including accrediting agencies. (See *Handbook of Accreditation*, pg. 48)			
8. Institutions seeking dual accreditation have submitted the reasons for wanting dual accreditation to each accrediting agency and to the Secretary of the U.S. Department of Education, and the institution has designated which agency's accreditation is to be utilized in determining the institution's eligibility for program participation under the Higher Education Act. (See *Handbook of Accreditation*, pg. 48)			
Non-Main Campus Sites: General	**YES**	**NO**	**N/A**
1. Ownership of all non-main campus sites is the same (same governance, entity, proprietorship or partnership, or the same corporation) as the main campus. (See *Handbook of Accreditation*, pgs. 37-40)			

2. The Commission has approved every instance where the names of non-main campus sites have been expanded to clearly identify different locations or specific programs. (See *Handbook of Accreditation*, pgs. 37-40*)*			
3. Non-main campus locations operate under the supervision of a full-time, on-site administrator who reports to the chief administrator at the main campus. (See *Handbook of Accreditation*, pgs. 37-40*)*			
Non-Main Campus Sites: Branch Campuses	**YES**	**NO**	**N/A**
1. The complete name of the main campus and the branch is identified in all publications and advertisements when using a campus name. (See *Handbook of Accreditation*, pgs. 37-40*)*			
2. Duplicate records on personnel, financial matters, student attendance, and student educational progress and outcomes data for non-main campus sites are kept at the main campus. (NOTE: Institutions capable of maintaining and accessing records electronically may keep all records previously mentioned at the main campus.) (See *Handbook of Accreditation*, pg. 37-40*)*			
3. Programs offered at non-main campus sites are approved by the Commission and are described in the main campus catalog (or catalog supplements for branch campuses). (See *Handbook of Accreditation*, pgs. 37-40*)*			
Non-Main Campus Sites: Extension Campuses	**YES**	**NO**	**N/A**
1. Extensions are located within a fifty-mile radius of the main campus. (See *Handbook of Accreditation*, pg. 38*)*			
2. All extension programs are included in the main campus catalog. (See *Handbook of Accreditation*, pg. 38*)*			
Non-Main Campus Sites: Extended Classrooms	**YES**	**NO**	**N/A**
1. Extended classrooms must be located within two miles of a **main** or **branch** campus. (See *Handbook of Accreditation*, pg. 39*)*			
2. Extended classrooms must be supervised by the chief administrator of the **main** or **branch** campus. (See *Handbook of Accreditation*, pg. 39)			
Non-Main Campus Sites: Instructional Service Centers	**YES**	**NO**	**N/A**
1. Program instruction at instructional service centers is under the direct control of the main campus and located within the geographic service area designated by the governing board of the institution. (See *Handbook of Accreditation*, pg. 39-40*)*			
2. All instructional service center offerings are approved by the Commission. (See *Handbook of Accreditation*, pg. 39-40*)*			
3. All student services are available on-site at the instructional service center and the full range of student services is made accessible to participating students at the main campus. (See *Handbook of Accreditation*, pg. 39-40*)*			
4. Instructional service centers are a joint venture between the institution and an employer or another educational agency. (See *Handbook of Accreditation*, pg. 39-40*)*			
5. The complete name of the main campus is identified in all publications and advertisements when referring to an instructional service center. (See *Handbook of Accreditation*, pg. 39-40*)*			
Non-Main Campus Sites: Additional Space	**YES**	**NO**	**N/A**
1. Additional space acquired for instructional or student services purposes must be located within one quarter of a mile from a **main** campus or **branch** campus. (See *Handbook of Accreditation*, pg. 39*)*			

STANDARD ONE
Institutional Mission
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Standard 1 Criteria	YES	NO	
1. The primary mission of the institution is to instruct students to such competency levels that they are qualified for initial employment and/or career advancement.			
The institution's mission is 2. clearly and concisely stated in written form,			
3. published in hard copy and/or online,			
4. publicly available, and			
5. used consistently in publications.			
6. The institution has an organized and functional institutional advisory committee. **VISITING TEAMS: If NO is checked, leave criteria 7-11 blank. Write one finding of non-compliance that specifies BOTH the requirement to appoint an institutional advisory committee AND each criterion 7-11. (See instructions page.)**			MULTI-PART CRITERION
The institutional advisory committee meets the following requirements: 7. Is composed of no less than three persons, all of whom are external to the institution. (Committees larger than three members **must** maintain a majority of external members.).			
8. Has at least three external members who meet these criteria present at each meeting (with at least two members physically present and one virtually present).			
9. Meets at least once annually, if serving only in an institutional advisory capacity, or twice annually, if serving in an occupational advisory capacity.			
10. Keeps typed minutes to document its activities, recommendations, and meeting attendance.			
11. Is used to seek input and provide community involvement in maintaining a relevant mission for the institution.			
The criteria above represent the minimum requirements for an institutional advisory committee. The institutional advisory committee can also serve as the occupational advisory committee if only one occupational advisory committee is required for the institution. In those cases, the requirements of both committees (institutional and occupational) must be met. . (See *Policies and Rules of the Commission* for more information regarding "Requirements for Institutional Advisory Committees".)			

STANDARD TWO
Educational Programs (Composite)
RAS/NETI Version – 2024 Edition

This check sheet is a composite of all educational programs reviewed. Any program reviewed that does not meet any one of the following criteria should have a "No" response checked and should be included in the summary of findings written for this standard.

Standard 2 Criteria	YES	NO	N/A
A. Educational Program Administration			
The institution has implemented a systematic process to document that each program **VISITING TEAMS: If NO is checked, leave criteria 1-9 blank. Write one finding of non-compliance that specifies BOTH the requirement for a process AND each criterion 1- 8 . (See instructions page.)**			MULTI-PART CRITERIA
1. aligns with the mission of the institution,			
2. has clearly stated objectives,			
3. has content relative to its objectives and aligned with the needs of the people and industries served by the program,			
4. is evaluated annually to ensure currency of its objectives and content,			
6. includes coursework that is qualitatively and quantitatively consistent at each campus where it is offered.			
7. is approved and administered under established institutional policies and procedures and supervised by an administrator who is part of the institutional organization, and			
8. includes on-campus administrators and faculty in planning activities.			
B. Associate Degree			
Each associate degree program meets the following requirements:			
1. The program is designed to lead graduates directly to employment in a specific career.			
2.. The appropriate applied degree title, such as Associate of Applied Technology, Associate of Applied Science, Associate of Occupational Studies, Associate of Science, or Associate of Occupational Technology, is used and includes the specific career and technical education field (i.e., Associate of Applied Science in Veterinary Technology).			
3. The program has a minimum of 60 semester hours or 90 quarter hours.			
4. The program includes a minimum of 15 semester hours or 23 quarter hours of general education courses that are not applicable to a specific occupation, with a minimum of one course from each of the following areas: humanities, behavioral sciences, natural or applied sciences, and mathematics.			

C. Occupational Advisory Committee Activities			
1. Occupational advisory committees are appointed for each program to ensure that desirable, relevant, and current practices of each occupation are being taught. **VISITING TEAMS: If NO is checked, leave criteria 2-7 blank and resume with criterion 8. Write one finding of non-compliance that specifies BOTH the requirement to appoint a committee for each program AND each criterion 2-7. (See instructions page.)**			MULTI-PART CRITERIA
Each occupational advisory committee complies with the following requirements: 2. Consists of a minimum of three members external to the institution			
3. Represents expertise in the occupational field(s) for which the program prepares students			
4. Represents each service area covered by the program at each meeting (all locations)			
5. Has at least three external members who meet these criteria present at each Meeting			
6. Conducts at least one face-to-face meeting annually with at least two of the three required external members physically present (one or more external members may be virtually present)			
7. Follows an agenda and maintains typed minutes to document its activities, recommendations, meeting attendance, and contact information for each member *NOTE: Additional guidance regarding occupational advisory committees is provided in the Policies and Rules of the Commission.*			
8. Reviews each educational program no less than once annually and provide the institution with state-of-the-industry updates/information and projections of changes that may occur within the industry that committee members represent (See *Policies and Rules of the Commission* for more information regarding "Requirements for Occupational Advisory Committees".)			
9. Assess program graduation requirements as an indicator of the level of completer preparedness.			

NOTE: Additional guidance regarding occupational advisory committees is provided in the Policies and Rules of the Commission. The Employer Program Verification Form may be completed by members of the occupational advisory committee. Only three signatures per program are required.

Standard 2 Criteria	YES	NO	N/A
D. Program Curriculum and Instruction			
1. A curriculum or instructional plan for each program as been developed, is in use, and included the following components: [See Section VII. Definitions – Plan] **VISITING TEAMS: If NO is checked, leave criteria 2-5 blank and resume with criterion 6. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 2-5 . (See instructions page.).**			MULTI-PART CRITERIA
2. instruction in the occupational skills and academic competencies essential to success in the occupation, including job knowledge, work habits, and attitudes.			
3. sufficient practice with equipment and materials similar to those currently used in the occupation,			
4. job-related health and safety, are an integral part of instruction and are incorporated into curricula as appropriate to the occupation			
5. an orientation to technology is provided and technical support is available to students			
6. An Employer Program Verification Form is used to assess the appropriateness of program length and tuition costs in relation to the documented entry-level earnings of program completers			
7. A credit hour is equivalent to a minimum of each of the following: one semester credit for 15 clock hours of lecture, 30 clock hours of laboratory, or 45 clock hours of work-based activities; or one quarter credit for 10 clock hours of lecture, 20 clock hours of laboratory, or 30 clock hours of work-based activities			
8. Each course/program has in place course descriptions, learning objectives, course requirements (e.gl, standard syllabus, outcomes, grading resources, etc.) and learning outcomes in order to facilitate quality instruction and the assessment of student learning.			
9. Instruction (lecture, lab, and work-based activities) required for program completion is determined by desired student learning outcomes. (Objective 2-C-3) The organization of syllabi, lesson plans, competency tests, and other instructional materials is used to: **VISITING TEAMS: If NO is checked, leave criterion 10-13 blank. Write one finding of non-compliance that specifies each criterion 10-13. (See instructions page.)**			MULTI-PART CRITERIA
10. define a sequence for the achievement of objectives			
11. guide the delivery of instruction			
12. direct learning activities			
13. Implement a system, objective, and equitable method of evaluating student achievement based on learning objectives and required competencies.			
E. Coursework Delivered via Distance Education or Hybrid			
1. Distance education or hybrid courses and programs adhere to the same standards, rigor, breadth, and completion requirements as their on-campus counterparts, ensuring consistent quality and awarding equivalent credentials.			
2. Faculty teaching distance education or hybrid courses ensure timeliness of their responses (synchronously or asynchronously) to students' requests by following institutional requirements on response times of no more than 24 hours within the published operational schedule of the program/course.			
3. The institution has processes in place to determine that the student who registers for a distance education or hybrid course or program is the same student who participates in and completes the course or program and receives the academic credit (with methods such as secure logins, passwords, or proctored examinations).			
4. The institution directly verifies the currency and quality of all contracted courseware on an annual basis, is directly responsible for such currency and quality, and maintains curriculum oversight responsibility within all contracts.			
6. The institution monitors student progress in distance education activities; such monitoring may include frequency of logins, confirmation of student time online, and the percentage of coursework completed.			

STANDARD TWO
Educational Programs
RAS/NETI Version – 2024 Edition

F: Associate Degree Nursing Programs

	Standard 2 Associate Degree Nursing Criteria	YES	NO	N/A
1.	The governing organization and nursing education unit ensure representation of the nurse administrator and nursing faculty in governance activities; opportunities exist for student representation in governance activities.			
2.	Partnerships that exist promote excellence in nursing education, enhance the profession, and benefit the community.			
3.	The nursing education unit is administered by a nurse who holds a graduate degree with a major in nursing.			
4.	The nurse administrator is experientially qualified, meets governing organization and state requirements, and is oriented and mentored to the role.			
5.	When present, the nursing program coordinators and/or faculty who assist with program administration are academically and experientially qualified.			
6.	The nurse administrator has authority and responsibility for the development and administration of the program and has sufficient time and resources to fulfill the role responsibilities.			
7.	The nurse administrator has the authority to prepare and administer the program budget with faculty input.			
8.	Policies for nursing faculty and staff are comprehensive, provide for the welfare of faculty and staff, and are consistent with those of the governing organization; differences are justified by the purpose and outcomes of the nursing program.			
9.	Full-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency. They are qualified to teach the assigned nursing courses. (Full and part-time faculty include those individuals teaching and/or evaluating students in the classroom, clinical, or laboratory settings.)			
10.	Part-time nursing faculty hold educational qualifications and experience as required by the governing organization, the state, and the governing organization's accrediting agency. They are qualified to teach the assigned nursing courses. (Full and part-time faculty include those individuals teaching and/or evaluating students in the classroom, clinical or laboratory settings.)			
11.	Preceptors, when utilized, are academically and experientially qualified, oriented, mentored, and monitored, and have documented roles and responsibilities.			
12.	The number and qualifications of staff within the nursing education unit are sufficient to support the nursing program.			
13.	Public information is accurate, clear, consistent, and accessible, including the program's accreditation status and the ACEN contact information.			
14.	The curriculum includes cultural, ethnic, and socially diverse concepts and may also include experiences from regional, national, or global perspectives.			
15.	The curriculum and instruction processes reflect educational theory, inter-professional collaboration, research, and current standards of practice.			
16.	Courses required for each program are offered with sufficient frequency for the student to complete the program within the publicized time frame.			
17.	Student clinical experiences and practice learning environments are evidence-based; reflect contemporary practice and nationally established patient health and safety goals; and support the achievement of the end-of-program student learning outcomes.			
18.	Fiscal resources are sustainable, sufficient to ensure the achievement of the end-of-program student learning outcomes and program outcomes, and commensurate with the resources of the governing organization.			

Standard 2 Associate Degree Nursing Programs (continued)	YES	NO	
19. The nursing program has a current systematic plan of evaluation. **VISITING TEAMS: If NO is checked, leave criteria 20-25 blank and resume with criterion 26. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 20-25. (See instructions page.)**			MULTI-PART CRITERION
The systematic plan of evaluation contains the following components: [See Section VII. Definitions – Plan.]			
20. Specific, measurable expected levels of achievement for each end-of-program student learning outcome and each program outcome			
21. Appropriate assessment method(s) for each end-of-program student learning outcome and each program outcome			
22. Regular intervals for the assessment of each end-of-program student learning outcome and each program outcome			
23. Sufficient data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome and each program outcome			
24. Analysis of assessment data to inform program decision-making for the maintenance and improvement of each end-of-program student learning outcome and each program outcome			
25. Documentation demonstrating the use of assessment data in program decision-making for the maintenance and improvement of each end-of-program student learning outcome and each program outcome			
26. The evaluation of Associate Degree Nursing Programs demonstrates that students have achieved each end-of-program student learning outcome and each program outcome.			
27. The program demonstrates evidence of students' achievement of each end-of-program student learning outcome.			
28. There are ongoing assessments of the extent to which students attain each end-of-program student learning outcome.			
29. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' attainment of each end-of-program student learning outcome.			
30. The program demonstrates evidence of graduates' achievement on the licensure examination. The program's most recent annual licensure examination pass rate will be at least 80% for first-time test-takers during the same 12-month period.			
31. There is an ongoing assessment of the extent to which graduates succeed on the licensure examination.			
32. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates' success on the licensure examination.			
33. There are a minimum of the three (3) most recent years of available licensure examination pass rate data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion.			
34. The program demonstrates evidence of students' achievement in completing the nursing program.			
35. The expected level of achievement for program completion is determined by the faculty and reflects student demographics.			
36. There is an ongoing assessment of the extent to which students complete the nursing program.			
37. There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of students' completion of the nursing program.			

Standard 2 Associate Degree Nursing Criteria (continued)		YES	NO	N/A
38.	There are a minimum of the three (3) most recent years of annual program completion data, and data are aggregated for the nursing program as a whole as well as disaggregated by program option, location, and date of program completion or entering cohort.			
39.	The program demonstrates evidence of graduates' achievement in job placement.			
40.	The expected level of achievement for job placement is determined by the faculty and reflects program demographics.			
41.	There is an ongoing assessment of the extent to which graduates are employed.			
42.	There is an analysis of assessment data and documentation that the analysis of assessment data is used in program decision-making for the maintenance and improvement of graduates being employed.			
43.	There are a minimum of the three (3) most recent years of available job placement data, and data are aggregated for the nursing program as a whole.			

STANDARD THREE
Program Outcomes
RAS/NETI Version – 2024 Edition

HB	Standard 3 Criteria	YES	NO	N/A
A.	**Completion**			
1.	1. The institution submits accurate program completion data each year to the Commission for comparison with required benchmarks.			
2.	2. The institution submits verifiable program completion data each year to the Commission for comparison with required benchmarks.			
	Item 3: This item is to be completed by Visiting Teams during accreditation visits.			
	*3. The data submitted on the most recent COE Annual Report or COE Excel spreadsheet is confirmed to be accurate on a random basis. Completion data for graduate completers has been verified for five students.			
3.	4. **FOR INITIAL ACCREDITATION ONLY:** The majority of programs meet the required benchmark for completion for the most recent 12-month period possible.			
4.	5. **FOR ACCREDITED INSTITUTIONS ONLY:** All programs meet the required benchmark for completion OR the institution has taken any actions required by the Commission due to program completion rates failing to meet the required benchmark.			
B.	**Placement**			
5.	6. The institution submits accurate program placement data each year to the Commission for comparison with required benchmarks.			
6.	7. The institution submits verifiable program placement data each year to the Commission for comparison with required benchmarks.			
	Item 8: This item is to be completed by Visiting Teams during accreditation visits.			
	*8. The data submitted on the most recent COE Annual Report or COE Excel spreadsheet is confirmed to be accurate on a random basis. Placement data for five graduate completers and five non-graduate completers has been verified.			
7.	9. **FOR INITIAL ACCREDITATION ONLY:** The majority of programs meet the required benchmark for placement for the most recent 12-month period possible.			
8.	10. **FOR ACCREDITED INSTITUTIONS ONLY:** All programs meet the required benchmark for placement OR the institution has taken any actions required by the Commission due to program placement rates failing to meet the required benchmark.			
C.	**Licensure Exam Pass Rate**			
9.	11. If applicable, the institution submits accurate licensure exam pass rate data each year to the Commission for comparison with required benchmarks.			
10.	12. If applicable, the institution submits verifiable licensure exam pass rate data each year to the Commission for comparison with required benchmarks.			
	Item 13: This item is to be completed by Visiting Teams during accreditation visits.			
	*13. The data submitted on the most recent COE Annual Report or COE Excel spreadsheet is confirmed to be accurate on a random basis. Licensure performance data has been verified for five students.			
11.	14. **FOR INITIAL ACCREDITATION ONLY:** If applicable, the majority of programs meet the required benchmark for licensure exam pass rates for the most recent 12-month period possible.			

12.	15. **FOR ACCREDITED INSTITUTIONS ONLY:** All applicable programs meet the required benchmark for licensure exam pass rate OR the institution has taken any actions required by the Commission due to licensure exam pass rates failing to meet the required benchmark.			
	D. Follow-Up			
13.	16. The institution has a written plan to ensure that program outcomes follow-up is systematic and continuous, and includes the following elements: [See Section VII. Definitions – Plan]. **VISITING TEAMS: If NO is checked, leave criteria 18-21 blank and resume with criterion 22. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 18-21. (See instructions page.)**			**MULTI-PART CRITERIA**
14.	17. Identification of responsibility for coordination of follow-up activities~~;~~			
15.	18. Methods for collection of data on completion, placement, and licensure exam pass rates			
16	19. Information collected from completers and employers of completers that is focused on program effectiveness and level of satisfaction with the education that was received, and			
17.	20. methods for surveying completers and employers of completers			
18.	21. How the information from follow-up data will be shared with instructional personnel and administrative staff to improve the quality of programs.			
19.	22. The program outcomes follow-up plan is reviewed annually by the faculty and administration (and revised as necessary).			
20.	23. Program outcomes follow-up information is used to evaluate and improve the quality of program outcomes.			
21.	24. Follow-up information collected from completers and employers is made available at least annually to instructional personnel and administrative staff.			

These items are in place only for data verification purposes.

STANDARD FOUR
Strategic Planning
RAS/NETI Version – 2024 Edition

Standard 4 Criteria	YES	NO	
1. The institution has a written strategic plan. [See Section VII. Definitions – Plan.] **VISITING TEAMS: If NO is checked, leave criteria 2-7 blank and resume with criterion 8. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 2-7. (See instructions page.)**			MULTI-PART CRITERIA
The institution's written strategic plan includes, at a minimum, the following components: 2. The mission of the institution			
3. The vision of the institution			
4. Objectives for a minimum period of three years			
5. Strategies for achieving the objectives			
6. Current and projected financial resources that provide a basis for initiatives specified in the strategic plan			
7. Annual evaluation of progress toward achieving the objectives			
8. The faculty, staff, administration, and institutional advisory committee annually review the strategic plan and the institution's progress toward meeting its stated objectives (and revise as necessary).			

STANDARD FIVE
Learning Resources
RAS/NETI Version – 2024 Edition

Standard 5 Criteria	YES	NO
A. Educational Resources		
1. Educational resources made available to faculty, staff, and students focus on the achievement of desired outcomes and learning objectives and are appropriate for and inclusive of all methods of program delivery.		
2. The institution has identified staff member(s) responsible for the implementation and coordination of the educational resources		
3. The institution provides a documented orientation on the use of educational resources and services applicable to instructors, staff, and students.		
4. The institution budgets annually for educational resources		
5. The institution annually evaluates the effectiveness of its educational resources and uses the results to modify and improve its resources and services.		
6. **This criterion applies to ALL campuses**: The institution's educational resources, including media services, technology, facilities, and materials, are comprehensive and current.		
7. A current inventory of educational resources is maintained.		
8. Educational resources are selected with faculty input, and accessible to the faculty and students		
B. Instructional Equipment and Supplies		
9. Relevant and up-to-date instructional equipment and supplies are available to support the programs offered by the institution		
10. The institution has a procedure for purchasing and storing instructional equipment and supplies		
11. To support continuous instruction, the institution has a procedure for emergency purchases of instructional supplies and to ensure the acquisition and repair of instructional equipment within a reasonable period of time. Sufficient funds are available to support the provision of instructional equipment and supplies that uphold the quality of occupational education		
12. The institution has a written procedure for maintaining instructional equipment and for replacing or disposing of obsolete equipment. [See Section VII. Definitions - Procedure.]		
13. Instructional equipment and supplies meet appropriate and required safety standards.		

STANDARD SIX
Institutional Infrastructure
RAS/NETI Version – 2024 Edition

Standard 6 Criteria	YES	NO	N/A
A. Physical Resources			
1. A plan for the ongoing operation and maintenance of physical facilities has been developed and is in use **VISITING TEAMS: If NO is checked, leave criteria 2-7 blank and resume with criterion 8. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 2-7. (See instructions page.)**			MULTI-PART CRITERIA
The operation and maintenance plan addresses the following elements: 2. Adequacy and improvement to physical facilities			
3. Budget available for facility maintenance and improvement			
4. Personnel			
5. Non-instructional equipment and supplies			
6. Compliance with relevant state laws, federal codes and procedures			
7. Annual evaluation of the plan (and revised as necessary)			
8. **This criterion applies to ALL campuses:** Physical facilities at all locations provide adequate, safe, and clean facilities with appropriate supporting utilities for classrooms, laboratories/shops, offices, restrooms, lounges, meeting rooms, parking, etc.			
B. Health and Safety			
1. A written plan for assuring the health and safety of the institution's employees, students, and guests to maintain readiness is in use and includes procedures for reporting and investigating incidents affecting the health and safety of the institution's constituents. [See Section VII. Definitions – Plan and Real, Threatened, or Impending Danger.] **VISITING TEAMS: If NO is checked, leave criteria 2-4 blank and resume with criterion 5. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 2-4. (See instructions page.)**			MULTI-PART CRITERIA
The health and safety plan			
2. has been distributed to employees,			
3. is evaluated annually with input from employees (and revised as necessary), and			
4. ensures basic information about the plan is available to students.			
5. First aid supplies are readily available.			
C. Technical Infrastructure			
1. A plan for the institution's technical infrastructure has been developed and is in use **If NO is checked, leave criteria 2-7 blank and resume with criterion 8. Write one finding of non-compliance that specifies BOTH the requirement for a plan AND each criterion 2-7. (See instructions page.)**			MULTI-PART CRITERIA
2. addresses adequacy, improvements and protection of the technical infrastructure, including distance education infrastructure if applicable;			
3. addresses the ongoing operation and maintenance of technical infrastructure, including distance education infrastructure if applicable;			
4. ensures the privacy, safety, and security of institutional data;			
5. ensures computer system and network reliability whether provided directly by the institution or through contractual arrangements~~,~~			
6. is evaluated annually (and revised as necessary); and			
7. ensures basic information about the plan is available to the administration, faculty, and staff. [See Section VII. Definitions – Plan]			

8. The technology used by the institution to deliver services and, if applicable, program content to students meets the needs of the students without creating barriers to student support or learning.			
9. **This criterion applies to ALL campuses:** Procedures for preserving and protecting student coursework, testing, and records are provided by measures that ensure their preservation and protection.			

STANDARD SEVEN
Financial Resources
RAS/NETI Version – 2024 Edition

Standard 7 Criteria	YES	NO	N/A
1. A qualified financial officer or department oversees the financial and business operations of the institution.			
2. Financial records are maintained so that the institution's fiscal position can be analyzed in a timely manner.			
3 The institution demonstrates responsible financial management with funds sufficient to maintain quality educational programs and to complete the education of students enrolled.			
4. The institution uses adequate auditing and budgetary controls and procedures consistent with local, state, and federal requirements.			
5. The institution exercises proper management, financial controls, and business practices.			
6. Persons handling institutional funds or revenues from any source are bonded or covered under an employee-dishonesty insurance policy.			
7. Qualified personnel are responsible for proper financial record-keeping, reporting, and auditing.			
8. The institution has reported all contingent liabilities in a timely manner. [See Section VII. Definitions - Contingent Liability.]			
9. The institution has submitted notices and copies of all lawsuits filed against the institution within five (5) days of being served.			
10. Financial aid programs utilizing public and/or private funds are capably administered and accurately documented.			
11. The institution maintains compliance with the Higher Education Reauthorization Act Title IV eligibility and certification requirements, including compliance with default management and audit benchmarks.			
12. If the institution has processed Title IV loans or is currently processing Title IV loans, it has a default management plan that meets the requirements of the Commission for as long as required by the U.S. Department of Education.			
13. The institution utilizes a written, comprehensive student loan repayment program addressing student loan information, counseling, monitoring, and cooperation with available lenders			
14. The institution informs students of their ethical responsibilities regarding financial assistance.			
Special Financial Stability Requirement for Public Institutions (Item 14) 15. The institution identifies sources of funds and revenues and shows evidence of fiscal stability.			
Special Financial Stability Requirements for Non-Public Institutions (Items 16 through 18) 16. To document financial stability, the institution submits financial information required by the Council as described in the *Handbook of Accreditation*. [See Section VII. Definitions – Audited Financial Statement.] For initial accreditation, RASs and NETIs **must** submit audited financial statements for the two most recent fiscal years that include composite score worksheets prepared by an independent CPA. Restated/revised audited financial statements will not be accepted without third-party certification.			

Standard 7 – Financial Resources
Generic Version - 2024 Edition, Page 2

HB	Standard 7 Criteria (continued)	YES	NO	N/A
16.	The institution demonstrates financial stability through submission of the most recent audited financial statement that reflects 17. a minimum, unrounded composite score of 1.5 for the two most recent fiscal years as disclosed on a composite score worksheet included in the audit report; and			
17.	18. no condition or event which could potentially affect the institution's ability to continue operation, including but not limited to, contingent liabilities, on-going litigation, or the financial stability of a parent corporation.			

STANDARD EIGHT
Human Resources
RAS/NETI Version – 2024 Edition

Standard 8 Criteria	YES	NO	N/A
A. General			
1. Duties and responsibilities of each position are specified in written job descriptions made available to administrators, faculty, and staff of the institution.			
2. The institution has published and implemented procedures for handling complaints/grievances from faculty and staff that are consistent with the policies of the institution's governing board including complaints/grievances filed against the institution's chief administrator, if any.			
3. Procedures are in place for the continuous evaluation of the performance and effectiveness of full- and part-time employees, with at least an annual written review and evaluation.			
4. Orientation procedures for all employees are maintained and followed equitably.			
B. Faculty			
1. **This criterion applies to ALL campuses:** The institution has a sufficient number of faculty members to fulfill its mission and operate its programs.			
Each faculty member possesses 2. at least a high school diploma (or equivalent) for faculty hired after 2019,			
3. expertise in the area of responsibility that is actively maintained,			
4. additional requirements established for faculty members by the institution's governing board and/or state regulatory agencies.			
5. Faculty members who teach general education courses in associate degree programs hold a minimum of a bachelor's degree with 15 semester hours or 23 quarter hours in the teaching discipline with a grade of at least a 'C' in these courses.			
6. Faculty members who teach technical courses in associate degree programs have a minimum of an associate degree in an area that is related to the technical courses they teach. (In exceptional cases, evidence of documented work experience and skills in the technical field may be considered instead of formal academic requirements.)			
7. **For all coursework delivered via distance education or hybrid:** Faculty delivering instruction in a distance education format are full-time, part-time, or adjunct employees of the institution.			
8. **For all coursework delivered via distance education or hybrid:** The institution provides training for faculty who use technology in distance education courses and programs.			
9. The institution plans, provides, supports, and annually documents professional growth opportunities for and participation by all faculty members.			
10. Each full-time and part-time faculty member responsible for delivering instruction on a regular and ongoing basis in a technical field to stay current with industry trends in addition to any occupational advisory committee involvement.			

Standard 8 – Human Resources
RAS/NETI Version - 2024 Edition, Page 2

Standard 8 Criteria	YES	NO	N/A
C. Administrative and Supervisory Personnel			
1. **This criterion applies to ALL campuses:** The institution has a sufficient number of administrative and supervisory personnel to fulfill its mission and to oversee the operation of its programs and services.			
2. Administrative and supervisory personnel possess postsecondary education credentials and/or experience and demonstrated competencies appropriate to their areas of responsibility.			
D. Instructional Support Staff			
1. **This criterion applies to ALL campuses:** The institution has a sufficient number of instructional support staff members to fulfill its mission and deliver its programs.			
2. Personnel are employed to maintain student and financial records; to assist in producing instructional materials; and to prepare correspondence, reports, and other documents as needed.			
3. Instructional support staff possess education credentials and/or experience and demonstrated competencies appropriate to their areas of responsibility.			
E. Non-Instructional Support Staff/Services			
1. **This criterion applies to ALL campuses:** Custodial services are available to provide routine care and maintenance of facilities and grounds for the institution.			
2. **This criterion applies to ALL campuses:** Preventative maintenance services ensure continued operation of the facilities.			

STANDARD NINE
Organizational Structure
RAS/NETI Version – 2024 Edition

Standard 9 Criteria	YES	NO	N/A
1. The institution has a legally constituted governing body or board that has the legal authority and responsibility for the institution's operation and control.			
2. If applicable, the institution has possession of the currently valid original document(s), typically a state/federal agency approval, required to operate as an occupational education institution within the state or federal jurisdiction where it is located.			
3. The chief administrator is responsible for the institution's postsecondary operations and has the authority to implement the governing body's postsecondary policies.			
4. The institution has a designated chief administrator responsible for accreditation who is the person of record for all purposes of the Commission, is a full-time staff member of the institution, has his/her office on the main campus, and is the Commission's point of contact for all locations of the institution.			
5. An organizational chart is available to show the functional relationships among the personnel of the institution that promote the effective operation of educational programs and institutional services for students.			
6. The organizational structure promotes the effective operation of educational programs and institutional services for students.			

STANDARD TEN
Student Services and Activities
RAS/NETI Version – 2024 Edition

HB	Standard 10 Criteria	YES	NO	N/A
A. Admissions and Retention				
1.	1. **This criterion applies to ALL campuses:** The institution provides academic advisement services to assist students in planning for the occupational education programs they seek to pursue.			
2.	2. Tests or other means of assessing the achievement and aptitudes of students for various occupations are appropriate and are used to provide personalized career guidance and program admissions services to students.			
3.	3. **This criterion applies to ALL campuses:** There is a student orientation program to acquaint new students with policies, functions, and personnel of the institution.			
4.	4. The institution publishes attendance requirements and informs students of these requirements.			
5.	5. The institution has a written plan for addressing retention of students. [See Section VII. Definitions – Plan.] **VISITING TEAMS: If NO is checked, leave criteria 7-9 blank and resume with criterion 10. Write one finding of non-compliance that specifies BOTH this requirement AND each criterion 6-8. (See instructions page.)**			MULTI-PART CRITERIA
6.	**The institution's student retention plan** 6. includes input from faculty and students,			
7.	7. is evaluated on an annual basis (and revised as necessary), and			
8.	8. addresses how results are shared with faculty and staff.			
9.	Policies and procedures used for admission to programs must demonstrate relevance to students' abilities to complete the educational programs offered regardless of the method of delivery. In order to achieve this objective, candidate and accredited institutions must document compliance with the following requirements related to student admissions: 9. Admissions policies and procedures are clearly stated, consistently applied, non-discriminatory, published, and consistently communicated to students			
	10. Admission requirements offer reasonable expectations for successful completion of the occupational programs offered by the institution regardless of the method of delivery			
11.	11. If applicable: Institutions that admit students by exception to standard admission policies and procedures **VISITING TEAMS: If NO is checked, leave criteria a-d blank and resume with criterion 8. Write one finding of non-compliance that specifies BOTH this requirement AND each criterion a-d. (See instructions page.)**			MULTI-PART CRITERIA
	a. have written admissions policies and procedures for these exceptions,			
	b. apply them uniformly,			
	c. provide documented evidence on how they are used,			
	d. evaluate the effectiveness of the procedures used in admitting students by exception on an annual basis			
	12. If applicable: For students admitted to a Vocational English-As-A-Second Language program, the institution utilizes written admission procedures that comply with Policies established by the Commission.			
	13. If applicable: Students admitted into associate degree programs have documentation of a high school diploma or its equivalent.			
14.	14. The institution is responsible for any reasonable accommodation of students who are identified to have special needs			
B. Records				
1.	This criterion applies to ALL campuses: A designated staff member is responsible for maintaining official files and records of students.			

2	2. Written procedures are established for access to student coursework, testing, and records to ensure confidentiality, limiting access to authorized personnel only.			
3	3. Student records, including enrollment, financial, academic, and current educational progress, as well as program completion, job placement and if applicable licensure exam pass rate status, are available at the institution			
	Item 4: This item is to be completed by Visiting Teams during accreditation visits.			
	4. Number of student files reviewed (minimum of 25)			
4	4. The institution, upon request by current and former students, provides transcripts or procedures for obtaining transcripts containing, at a minimum, the following information: the program of study, courses or units of study completed with corresponding grades, period of enrollment, and credential awarded, if applicable.			
C. Complaints and Grievances				
1.	1. The institution has published and implemented grievance policies for handling complaints from students.			
2.	2. The institution includes the Commission's mailing address, telephone number, and website address within the grievance policy in case the grievance cannot be resolved at the institutional level.			
3.	3. Institutional records reflect that program complaints and grievances receive due process and include evidence of resolution.			
4.	4. The institution maintains records on student complaints that are filed in accordance with the institution's grievance policy to ensure acceptable quality in the educational programs offered by the institution.			
	Item 5: This item is to be completed by Visiting Teams during accreditation visits.			
	5. Number of complaints in file since last accreditation site visit. (All student complaints on file must be reviewed for compliance with the institution's grievance policy.)			
D. Placement Services				
1.	1. This criterion applies to ALL campuses: The institution provides placement services for all program completers			
2.	2. The institution demonstrates that it is following a written plan for placement services that includes the following elements**:** **VISITING TEAMS: If NO is checked, leave criteria 28-34 blank and resume with criterion 35. Write one finding of non-compliance that specifies BOTH this requirement AND each criterion 28-34. (See instructions page.)**			**MULTI-PART CRITERIA**
3.	3. Identification of responsibilities for coordination of placement services,			
4.	4. A communications network that exists between the person responsible for placement coordination, the staff, the faculty, and various businesses and industries of the service area,			
5.	5. A list of employers and employment opportunities,			
6.	6. Counseling of students,			
7.	7. Maintenance of placement records for completers as a means of measuring the success of the institution in achieving its mission,			
8.	8. Evaluation on an annual basis (and revised as necessary),			
9.	9. A description of how evaluation results are shared with faculty and staff and used for continuous improvement [See Section VII. Definitions – Plan.]			

	E. Effectiveness of Student Services			
1.	1. The institution has a written plan for determining the effectiveness of student services, and ensures that the plan **VISITING TEAMS: If NO is checked, leave criteria 36-39 blank. Write one finding of non-compliance that specifies BOTH this requirement AND each criterion 36-39. (See instructions page.)**			MULTI-PART CRITERIA
2.	2. identifies responsibilities for coordination of student services,			
3.	3. provides for the counseling of students,			
4.	4. is evaluated on an annual basis, and			
5.	5. addresses how evaluation results are shared with faculty and staff and used for continuous improvement. [See Section VII. Definitions – Plan.]			

Criteria for Publications

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

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

b. Other publications that make any reference to the institution's status (candidacy or accredited) with the Commission must be accurate and must include the name, address, telephone number, and website address of the Commission. (In lieu of reference to the Commission, the institution may use the following statement: "For information about national and program accreditation, contact the institution.")

c. The website is readily and publicly available to students, prospective students, and other constituents to provide current information as specified below:
   1. The name of the institution exactly as approved by the Commission and the institution's authorizing agency
   2. The name, email address, and telephone number of the institution's Chief Administrator
   3. A list of programs that is consistent with those approved by the Commission and state/federal agencies
   4. Photos (if used) that accurately depict the institution's physical facilities and programs