

**NEW ADMINISTRATIVE SITE  
REPORT TEMPLATE**

# Background

The Distance Education Accrediting Commission requires that all institutions seeking to add an administrative site obtain prior approval from the Commission and undergo an on-site visit. Prior approval serves two main purposes: (1) It provides the institution an opportunity to critically reflect on its operations, processes, and procedures prior adding an administrative site and (2) it provides the on-site team with a comprehensive overview of the institution, its mission, and its processes that are integral to delivering quality distance education.

The Distance Education Accrediting Commission’s accreditation process is grounded on the fundamental principle of peer review that enables faculty and administrative staff from within higher education to make recommendations essential to ensuring the quality of learning and institutional operations for all students. The process is guided by transparent standards that are established collaboratively by professional peers and member institutions.

The on-site visit provides an opportunity for evaluators to meet with key staff members, faculty/instructors, principal managers, outside accountants, governing board members, and advisory council members. The evaluators verify that the institution is meeting its mission and can demonstrate successful student achievement.

This report informs the Commission whether the institution is meeting, partially meeting, or not meeting each of the DEAC accreditation standards and core components by adding a new administrative site. Approximately four to six weeks following the on-site visit, the report is provided to the institution for response. Both the report and the institution’s response are submitted to the Commission for review prior to final decision making.

# Instructions

It is the evaluator’s responsibility to review and assess the accuracy of the information presented in the application and during the on-site visit. By completing the following report template, the Chair of the evaluating team presents a single overall determination of whether the institution adequately demonstrates that it meets DEAC’s accreditation standards when adding an administrative site.

Findings guidelines:

* **Meets Standard:** The institution demonstrates compliance with the intent of the accreditation standard or core component.
* **Partially Meets Standard:** The institution was able to demonstrate compliance with some, but not all, of the elements contained in the accreditation standard or core component.
* **Does Not Meet Standard:** The institution was unable to demonstrate compliance with a majority of the elements contained in the accreditation standard or core component.

The Chair should provide clear and concise descriptions within the “Comments” section of the report to support each determination that a standard or core component is met, partially met, or not met. If an institution meets the accreditation standard, the Chair may want to consider highlighting within the Comments section the processes and procedures the institution followed that enabled it to demonstrate compliance. If an institution partially meets or does not meet a standard, the Chair needs to adequately describe why the evaluation team reached this decision and refer, as appropriate, to narrative sections and exhibits within the SER that support the determination.

The Chair must also indicate the required actions necessary for the institution to demonstrate compliance with the partially met or unmet accreditation standard. Each required action must be tied back to an accreditation standard or core component.

For required actions, the Chair should begin each statement with, “[Insert Name of Institution] needs to [insert the action necessary by the institution to demonstrate compliance with the accreditation standard.]”

As part of the peer review process, it is important that institutions receive suggestions for improving their educational offerings and support services. The accreditation process allows the institution to benefit from an external review and perspective. The Chair is encouraged to provide suggestions within the report. Suggestions are those recommendations that are not required to meet minimum accreditation standards but are provided to the institution as an opportunity for growth and improvement.

For suggestions, the Chair should begin each statement with, “[Insert Name of Institution] may want to consider [insert the recommendation for improvement.]”

It is the Chair’s responsibility to review the merits and evidence presented for each determination. The Chair has the discretion to choose a finding based on the institution’s response and evidence presented during the on-site visit.

**Report Submission:** The Chair emails the completed report to DEAC’s director of accreditation four weeks following the on-site visit. Once all information is received, DEAC notifies the Chair to appropriately dispose of all institutional materials.

Helpful Hints

* The report should be objectively written in third person, narrative format using declarative sentences and simple verbs. The report should avoid broad generalities and speculative views.
* The report represents an accurate, concise, factual, and thorough presentation of the findings during the on-site visit.
* When making a determination whether the institution meets, partially meets, or does not meet accreditation standards, the Chair should include evidence of documents reviewed on site or analyzed in the report that led to the finding. Include specific examples.
* The report documents attributes and deficiencies using language found in the accreditation standards and core components. All deficiencies must be documented.
* The report should not require an institution to implement a new program or procedure in order to demonstrate compliance with a partially met or unmet accreditation standard. The Chair’s report states the required action necessary to provide evidence or demonstrate compliance. The institution bears responsibility for demonstrating compliance with DEAC’s accreditation standards.
* The report accurately presents comments, required actions, and suggestions using direct quotations, references, and data.
* The report does not make recommendations to the Commission concerning the overall accreditation of the institution.

DEAC New Administrative Site Report (Confidential)

Name of Institution: Name of Institution

Date of on-site visit: Date of Onsite Visit

Submitted By: Evaluator Name

Date of Report: Date of Report

On-site Team Members

Chair

Name  
Title  
Institution or Affiliation

DEAC Staff Observer

Name  
Title

Institution or Affiliation

On-site Visit Background and Summary

**Visit Summary:** Provide an overview of the on-site visit including how well the institution was prepared.   
**Institutional Overview:** Provide an overview of the applicant institution, including founding, organizational structure, target student population, legal form and governance, and status of state authorization.

# Accreditation Standards Findings

## Standard XI: Financial Responsibility

1. **Financial Practices:** The institution shows it is financially responsible by providing complete, comparative financial statements covering its two most recent fiscal years and by demonstrating that it has sufficient resources to meet its financial obligations to provide quality instruction and service to its students. Financial statements are audited or reviewed and prepared in conformity with generally accepted accounting principles in the United States of America or International Financial Reporting Standards. The institution’s budgeting processes demonstrate that current and future budgeted operating results are sufficient to allow the institution to accomplish its mission and goals.

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| **Standard XI.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the Accreditation Standards. Each required action must correspond to an Accreditation Standard or core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum Accreditation Standards but are provided to the institution as an opportunity for growth and improvement.

## Standard XII: Facilities, Equipment, Supplies, Record Protection and Retention

1. **Facilities, Equipment, and Supplies:** The institution maintains sufficient facilities, equipment, and supplies to achieve its mission and values and support its educational offerings and future operations. A written plan outlines the maintenance and upgrade of facilities, equipment, and supplies, and includes a disaster response and recovery plan. The plan states the resources that are budgeted to support its goals. Buildings, workspace, and equipment comply with local fire, building, health, and safety regulations and are appropriately equipped to handle the educational program(s) of the institution.

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| **Standard XII.A. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the Accreditation Standards. Each required action must correspond to an Accreditation Standard or core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum Accreditation Standards but are provided to the institution as an opportunity for growth and improvement.

1. **Record Protection:** The institution’s financial, administrative, and student educational records are maintained in a reasonably accessible place and are adequately protected in accordance with applicable federal and state laws.
   1. If maintaining documents electronically, the institution provides audit records to verify that the images were properly created and validated.
   2. If an institution accepts digitally signed transcripts or electronically transferred verified data from an outside source, the institution documents the outside source using a system that provides registration and verification of participants, protocols for securely sending and receiving files, logging of file transmissions, and electronic notification. The outside source complies with all applicable laws and regulations governing the activities and services provided, including FERPA and other laws concerning the privacy and confidentiality of information and records.

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| **Standard XII.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the Accreditation Standards. Each required action must correspond to an Accreditation Standard or core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum Accreditation Standards but are provided to the institution as an opportunity for growth and improvement.

1. **Record Retention:** The institution’s financial, administrative, and student educational records are retained in accordance with applicable federal and state laws. The institution implements a comprehensive document retention policy.

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| **Standard XII.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the Accreditation Standards. Each required action must correspond to an Accreditation Standard or core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum Accreditation Standards but are provided to the institution as an opportunity for growth and improvement.

1. **State Authorization:**
   1. The institution is properly licensed, authorized, exempted, or approved by all applicable state education institutional authorizations (or their equivalent for non-U.S. institutions).
   2. Exemptions from state law are supported by state-issued documentation or in statutory language for that state.

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| **Standard XII.E. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

**Comments:** Provide comments to support the finding based on the institution’s responses and evidence provided prior to and during the on-site visit.

**Required Actions:** Provide the required actions necessary for the institution to demonstrate compliance with the Accreditation Standards. Each required action must correspond to an Accreditation Standard or core component.

**Suggestions:** Suggestions are those recommendations that are not required to meet minimum Accreditation Standards but are provided to the institution as an opportunity for growth and improvement.