

**NEW DIVISION  
COMPLIANCE ASSESSMENT FORM**

# Instructions

The Distance Education Accrediting Commission requires that all institutions seeking to add a new division and related program(s) 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 questions on this Compliance Assessment Form are designed to assist on-site team evaluators in determining whether institutions continue to meet the intent of DEAC accreditation standards when adding a new administrative site. Evaluators are not limited to the questions on this rating form. This rating form is for the evaluator’s use only. Evaluators do not need to send this rating form to DEAC.

DEAC evaluators decide whether institutions meet, partially meet, or do not meet accreditation standards. For any ratings of “partially meets” or “does not meet,” the evaluator must provide a “required action” that instructs the institution on what it needs to provide in order to demonstrate compliance with the identified standard. Evaluators should be careful to review institutions based only on the accreditation standards. Any recommendations beyond the scope of the accreditation standards should be provided under suggestions.

Evaluators should refer to the *DEAC Accreditation Handbook and Guide for Self-Evaluation* for any further clarification on institutional requirements.

Institution Information

Name of Institution: Name of institution

Date of Visit: Date of on-site visit

Name of Evaluator: Evaluator name

Position on Team: Position on team

Onsite Team Chair: Name of on-site team chair

Date Report Due to Chair: Date report is due

# Accreditation Standards

Standard I: Institutional Mission

1. **Description of the Mission**

The institution’s mission communicates its purpose and its commitment to providing quality distance educational offerings appropriate to the level of study offered. The mission establishes the institution’s identity within the educational community and guides the development of its educational offerings.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution present its mission statement? |  |  |  |
| Did the institution describe how the mission establishes the institution’s identity within the educational community? |  |  |  |
| Did the institution describe how its mission guides the development of educational offerings? |  |  |  |
| Does the mission communicate the institution’s purpose and its commitment to providing quality distance educational offerings? |  |  |  |
| Is the institution’s mission appropriate to the level of study offered? |  |  |  |
| **Standard I.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 a 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. **Review and Publication of the Mission**

The institution’s administrative and academic leadership team, as well as representative members of the institution’s faculty, shall review the mission on a regular basis to determine whether the mission should be amended and how the institution is performing against the objectives set by its mission statement. The published mission statement is readily accessible to students, faculty, staff, other stakeholders, and the public.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe the procedures followed by leadership and faculty representatives to regularly review the mission and its performance against mission-aligned objectives? |  |  |  |
| Did the institution explain how often the mission is reviewed by leadership and faculty representatives? |  |  |  |
| Did the institution identify who is responsible for ensuring that the mission is readily accessible to students, faculty, staff, other stakeholders, and the public? |  |  |  |
| Did the institution describe where the mission is published to demonstrate that it is readily accessible to students, faculty, staff, other stakeholders, and the public? |  |  |  |
| **Standard I.B. – 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 a 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 II: Governance

1. **Owners, Governing Board Members, Officials, and Administrators**

The institution’s owners, governing board members, officials, and administrators possess appropriate qualifications and experience for their positions. The owners, governing board members, officials, and administrators are knowledgeable and experienced in one or more aspects of education administration, finance, and the design and delivery of academic programs and related student services within a distance learning model. The institution’s policies clearly delineate the duties and responsibilities of owners, governing board members, officials, and administrators. Individuals in leadership and managerial positions are qualified by education and experience appropriate to their position and have the ability to oversee institutional operations consistent with the institution’s mission and program offerings.

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| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators knowledgeable and experienced in educational administration? |  |  |  |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators sufficiently knowledgeable and experienced to ensure quality that financial practices are in place to ensure institutional stability? |  |  |  |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators sufficiently knowledgeable and experienced to ensure quality design and delivery of academic programs and student services? |  |  |  |
| Are the institution’s owner(s), governing board members, chief executive officer, and top institution administrators sufficiently knowledgeable and experienced to ensure quality educational offerings delivered via distance education? |  |  |  |
| Does the institution have processes and policies that clearly delineate the duties and responsibilities of the owner(s), governing board members, chief executive officer, and top institution administrators? |  |  |  |
| Does the institution verify that all individuals in leadership and managerial positions are qualified by education and experience, as appropriate to their respective positions? |  |  |  |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators remain current within the disciplines offered by the institution and its educational community? |  |  |  |
| **Standard II.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 a 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. **Reputation of Institution, Owners, Governing Board Members, Administrators, and Other Officials**

The institution and its owners, governing board members, officials, and administrators possess sound reputations, a record of integrity, and ethical conduct in their professional activities, business operations, and relations. The institution’s name is free from any association with activity that could damage the reputation of the DEAC accrediting process, such as illegal actions, fraud, unethical conduct, or mistreatment of consumers. The institution’s owners, governing board members, officials, and administrators shall comply with the institution’s policies and procedures governing conflicts of interest and other applicable rules of conduct.

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators possess sound reputations and records of integrity? |  |  |  |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators practice ethical conduct in their professional activities, business operations, and business relations? |  |  |  |
| Do the institution’s owner(s), governing board members, chief executive officer, and top institution administrators comply with the institution’s policies and procedures governing conflicts of interest and other applicable rules of conduct? |  |  |  |
| Is the institution’s name free from any association with activity that could damage the reputation of the DEAC accrediting process, such as illegal actions, fraud, unethical conduct, or mistreatment of consumers? |  |  |  |
| Were any owner(s), governing board members, chief executive officer, or top institution administrators debarred by federal or state authorities from participating in any funding programs? |  |  |  |
| Did the institution affirm that it will promptly notify DEAC of any investigative, enforcement, legal, or prosecutorial actions which may be initiated against the institution, its owners, governing board members, officials, and administrators and that such notification shall include an explanation of the circumstances giving rise to such actions and the institution’s response to the same, as well as its explanation of why such actions should not be deemed a concern with respect to the integrity of the named persons or institutions? |  |  |  |
| **Standard II.B. – 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 a 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. **Succession Plan**

The institution has a written plan that describes the process that it follows to sustain operations in the event a leadership succession is necessary. The plan identifies specific people, committees, or boards responsible for carrying out the operation of the institution during the transition period. The plan includes a business continuity structure that the institution can implement immediately. The institution reviews the plan on an annual basis and revises as needed.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution’s succession plan identify events that would initiate a succession of leadership? |  |  |  |
| Did the institution identify the leadership, administrators, staff, committees, or boards responsible for carrying out its operations during the transition period? |  |  |  |
| Does the institution’s business continuity structure ensure that students’ education and services will not be disrupted during the transition period? |  |  |  |
| Are the business continuity procedures structured for immediate implementation, if necessary? |  |  |  |
| Is the institution’s succession plan reviewed and revised, as necessary, on an annual basis, as evidenced by meeting minutes or similar mechanism? |  |  |  |
| Does the institution involve appropriate individuals in reviewing and revising the succession plan? |  |  |  |
| **Standard II.C. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. | | |

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**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. **Maintaining Eligibility for Accreditation**

The institution maintains its eligibility for accreditation and is properly licensed, authorized, exempted, or approved by all applicable state education institutional authorizations (or their equivalent for non-U.S. institutions). Exemptions from state law are supported by state-issued documentation or by statutory language for that jurisdiction.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how it is properly licensed, authorized, exempted, or approved by all applicable state education institutional authorizations (or their non-U.S. institutional equivalent)? |  |  |  |
| Did the institution provide its DEAC State Authorization Form and documentation of its state licensures and authorizations? |  |  |  |
| Did the institution describe any exemptions from state law that it has determined, and did it provide the state-issued documentation or statutory language used to determine its exemption? |  |  |  |
| **Standard II.D. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. | | |

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Standard III: Institutional Planning and Effectiveness

1. **Mission Achievement**

The institution plans and implements comprehensive processes with clearly defined metrics and criteria to monitor effectiveness of all aspects of the institution’s operations against the institution’s mission and any initiatives identified in the strategic plan. The institution shares appropriate information from the data gathered with relevant stakeholder groups.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately monitor and measure operational effectiveness to verify alignment of institutional activities with its mission statement? |  |  |  |
| Did the institution provide the metrics and criteria it uses to measure achievement of its mission? |  |  |  |
| Did the institution adequately describe how the achievement of these metrics and criteria demonstrate that it is effectively carrying out its mission? |  |  |  |
| Did the institution identify who is responsible for documenting the institution’s achievement of its mission? |  |  |  |
| Did the institution describe processes used to seek input from relevant groups regarding the extent to which it achieves its mission? |  |  |  |
| Did the institution provide samples of the type of data collected for review that is relevant to its identified metrics? |  |  |  |
| Did the institution describe how it shares information on the achievement of its mission with relevant groups? |  |  |  |
| Did the institution describe how the mission achievement information is incorporated into improvement planning? |  |  |  |
| **Standard III.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.

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1. **Strategic Planning**

The institution implements a strategic plan utilizing a systematic process for the achievement of goals that support its mission. The institution’s planning processes involve all areas of the institution’s operations in developing strategic initiatives and goals by evaluating external and internal trends. Data is used to identify areas of weakness and opportunities for improvement, development, and growth. The plan helps institutions set priorities, manage resources, and set goals for future performance.

The strategic plan addresses, at a minimum, finances, academics, technology, admissions, marketing, personnel, and institutional sustainability and includes measurable action plans that lead to mission achievement. The plan identifies the individuals responsible, timelines for completion, and the financial resources required. The institution reviews the strategic plan at least annually and reports achievement of progress to its stakeholders.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe how its strategic planning efforts guide its pursuit of achieving its goals in support of its mission? |  |  |  |
| Did the institution provide a copy of its strategic plan? |  |  |  |
| Did the institution provide evidence of how it seeks input from internal and external stakeholders as a means of enhancing its strategic planning process? |  |  |  |
| Did the institution describe how the input received from internal and external stakeholders is used in its strategic planning process? |  |  |  |
| Did the institution identify areas for improvement via a SWOT Analysis (strengths, weaknesses, opportunities, and threats) or other means of evaluation?  [Note: A SWOT analysis is not specifically required, provided that the institution appropriately identified areas of weakness and opportunities for improvement through other evaluative processes or means.] |  |  |  |
| Does the institution’s strategic plan adequately identify proactive initiatives to address its identified areas for improvement and opportunity? |  |  |  |
| Does the institution’s strategic plan address the following: financial stability; development of educational offerings; integration of technology to enhance educational offerings; effective and accurate admissions and marketing activities to promote institutional sustainability; and professional development of leadership, faculty, and staff? |  |  |  |
| Did the institution describe the metrics that guide and measure the achievement of its strategic planning goals and objectives? |  |  |  |
| For each strategic initiative, did the institution identify the individual(s) responsible and timeline(s) for completion as well as the financial resources required to pursue its achievement? |  |  |  |
| Did the institution describe its annual strategic plan review process and how it reports achievement of progress to relevant stakeholders? |  |  |  |
| **Standard III.B. – 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.

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**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. **Institutional Effectiveness**

The institution develops a plan and implements a systematic and ongoing process to evaluate the content and delivery of its educational programs, its provision of student support services, and the effectiveness of its supporting infrastructure and staff operations. The institution engages in sound research practices; collects and analyzes quantitative and qualitative evidence about its effectiveness; and develops and implements action plans that are used to improve operations, academic achievement, educational technologies, and student services.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe its efforts to evaluate institutional effectiveness and implement action plans for improvement? |  |  |  |
| Did the institution describe its research practices and its data collection and analysis processes? |  |  |  |
| Did the institution provide examples of both quantitative and qualitative data collected and analyzed for evaluating institutional effectiveness? |  |  |  |
| Did the institution provide the key indicators that it uses to measure its effectiveness and to determine if improvements are needed? |  |  |  |
| Are the institution’s key indicators and the data collected adequate to measure effectiveness and inform necessary improvements? |  |  |  |
| Did the institution describe and provide examples of improvements to its educational programs based on the data collected and analyzed from its research? |  |  |  |
| Did the institution describe and provide examples of improvements to its student support services based on the data collected and analyzed from its research? |  |  |  |
| Did the institution describe and provide examples of improvements to its technological infrastructure and staff operations based on the data collected and analyzed from its research? |  |  |  |
| Did the institution describe how its institutional effectiveness programs and data are reviewed to determine achievement of initiatives? |  |  |  |
| **Standard III.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.

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Standard IX: Academic Leadership and Staffing

1. **Academic Leadership**

The institution provides academically qualified and experienced leadership to direct and oversee the effective delivery of its educational offerings using distance learning models. Academic leadership is responsible for the quality of program and student outcomes, as well as for the selection, training, continued quality, and development of faculty.

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s academic leaders possess the academic qualifications and experience to direct and oversee the effective distance education delivery of educational offerings? |  |  |  |
| Does the institution’s academic leadership include individuals who are adequately qualified and experienced in the institution’s implemented distance learning modalities? |  |  |  |
| Did the institution describe the respective roles and responsibilities of academic leadership personnel and do they reflect an adequate academic infrastructure to provide effective distance education delivery of its educational offerings? |  |  |  |
| Are the institution’s academic leaders assigned appropriate responsibilities based on their respective qualifications and identified roles within the organization? |  |  |  |
| Are there adequate processes in place to ensure that academic leaders are responsible for and engaged in review of program quality and student outcomes? |  |  |  |
| Does the institution have appropriate processes in place for academic leadership’s selection, training, and ongoing development of faculty? |  |  |  |
| **Standard IX.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.

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**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. **Faculty Qualifications**
2. The institution provides the appropriate number of qualified faculty to achieve program and course outcomes and provide instruction. The institution maintains faculty résumés, official transcripts, and copies of applicable licenses or credentials on file.

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| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution provide its faculty handbook? |  |  |  |
| Are the institution’s faculty qualification requirements appropriate, in relation to the subject areas taught and the credential level of the programs offered, as evidenced by its faculty qualification policy documentation? |  |  |  |
| Does the institution employ or contract with a sufficient number of qualified faculty to provide individualized instructional service to students? |  |  |  |
| Does the institution maintain adequate documentation to demonstrate that faculty are appropriately qualified? |  |  |  |

**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 a core component.

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1. Faculty teaching in high school programs are appropriately credentialed to teach the subject and level of the courses leading to a high school diploma.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching high school program courses? |  |  |  |
| Are the qualifications for faculty teaching high school program courses consistent with accepted best practices? |  |  |  |

**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 a core component.

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1. Faculty teaching technical courses have practical experience in the field and possess current licenses/certifications as applicable.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching technical, non-degree courses? |  |  |  |
| Are the qualifications for faculty teaching technical, non-degree courses consistent with accepted best practices? |  |  |  |

**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 a 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. Faculty teaching occupational/technical associate degrees possess credentials, evidence of academic preparation, practical experience, and licensure or certifications that are appropriate to the subject field and consistent with accepted postsecondary education practices in the subject field.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies to verify that faculty teaching in occupational/technical associate degree programs possess earned credentials awarded by appropriately accredited institutions, evidence of academic preparation, and/or practical experience and licenses or certifications in the field, as appropriate to the subject field? |  |  |  |
| Are the institution’s academic preparation, practical experience, and licensure or certification requirements for faculty teaching in occupational/technical associate degree programs consistent with accepted postsecondary education best practices in the subject field? |  |  |  |
| Does the institution have appropriate procedures in place for ensuring that faculty teaching in occupational/technical associate degree programs possess adequate academic preparation, practical experience, and licensure or certifications? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching in occupational/technical associate degree programs? If so, are they appropriate? |  |  |  |

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

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**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. Faculty teaching in undergraduate academic degree programs possess a degree at least one level above that of the program they are teaching and demonstrate expertise in the subject field they are teaching.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching undergraduate degree program courses? |  |  |  |
| Are the qualifications for faculty teaching undergraduate degree program courses consistent with accepted best practices? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching undergraduate degree program courses? If so, are they appropriate? |  |  |  |

**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 a core component.

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1. Faculty teaching in master’s degree programs possess a doctoral or terminal degree and demonstrate expertise in the subject field they are teaching.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching master’s degree program courses? |  |  |  |
| Are the qualifications for faculty teaching master’s degree program courses consistent with accepted best practices? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching master’s degree program courses? If so, are they appropriate? |  |  |  |

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

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**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. Faculty teaching in doctoral degree/first professional degree programs possess a doctoral degree/first professional degree in a related subject field.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching doctoral degree/first professional program courses? |  |  |  |
| Are the qualifications for faculty teaching doctoral degree/first professional program courses consistent with accepted best practices? |  |  |  |

**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 a 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. Faculty teaching general education possess a master’s degree in the field or a master’s degree and 18 semester hours of education in the general education subject area.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies on required qualifications for faculty teaching general education courses? |  |  |  |
| If general education outcomes are integrated into core courses, did the institution demonstrate that faculty are appropriately qualified for both roles (e.g. do assigned faculty possess appropriate degree qualifications and demonstrate expertise in the subject field they are teaching as well as the applicable, integrated general education subject area)? |  |  |  |
| Does the institution make any exceptions to qualifications for faculty teaching general education courses? If so, are they appropriate? |  |  |  |

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

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**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. All faculty credentials are awarded by an appropriately accredited institution.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have an appropriate process in place to verify that all faculty educational credentials are awarded by an appropriately accredited institution (or accepted foreign equivalent that is listed in the International Handbook of Universities)? |  |  |  |
| For faculty teaching technical, non-degree courses where faculty must possess current licenses/certifications applicable to a course or program, does the institution have an appropriate process in place to verify that all faculty licenses/certifications held are awarded by an appropriate entity and are active (if deemed necessary by the institutions policy on qualifications for faculty teaching technical, non-degree courses)? |  |  |  |

**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 a 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. Faculty may be assigned, in limited and exceptional cases, to teach at the undergraduate or master’s level by documented equivalency consisting of a demonstrated depth and breadth of experience in the content area. An institution that uses experiential equivalency in lieu of the required degree qualifications for faculty and other academic positions must establish and adhere to a clearly stated policy which authorizes the use of experiential equivalency only in exceptional cases and only where equivalency is demonstrated pursuant to published and objective criteria. In such cases, the institution implements:
2. a well-defined policy, with processes and procedures to evaluate the need for and assignment of faculty by equivalency; and
3. procedures that ensure that adequate oversight of teaching and learning is provided by individuals who possess degree qualifications in accordance with faculty qualifications listed in IX.B.4-6 and 8 above.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate policies for faculty qualification equivalency, including need evaluation and faculty assignment procedures? |  |  |  |
| Do the institution’s policies ensure that faculty qualification equivalency is only considered in limited and exceptional cases? |  |  |  |
| Does the institution require appropriate documentation to determine that a faculty member has sufficient experience, knowledge, and expertise necessary to substitute faculty qualification equivalency for the degree qualifications set forth in Standards IX.B.4-6 and 8? |  |  |  |
| Does the institution have adequate procedures in place to ensure that adequate oversight of teaching and learning is provided by individuals who possess appropriate degree qualifications as set forth in Standards IX.B.4-6 and 8? |  |  |  |

**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 a 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 IX.B. – Meets, Partially Meets, Does Not Meet, or Not Applicable** | Choose a finding. |

1. **Faculty Training**

All faculty must be trained in or have demonstrated experience with the principles of distance learning pedagogy. In addition, faculty shall be regularly trained in institutional policies, existing and emerging instructional approaches and techniques, and the use of instructional technology and academic resources. Faculty are evaluated on a regular basis for effectiveness in teaching and responsiveness to student needs.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately train and/or verify that faculty have experience with the principles of distance learning pedagogy in use? |  |  |  |
| Are faculty regularly trained in institutional policies, instructional approaches and techniques, and the use of instructional technology and resources? |  |  |  |
| Are faculty evaluated regularly for effectiveness in teaching and student communication responsiveness? |  |  |  |
| **Standard IX.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 a 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. **Professional Development and Scholarship**

Faculty and academic staff are provided professional development and support for scholarly pursuits aligned to the institution’s mission and level of programs offered.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have an adequate professional development and scholarship support policy for faculty and academic staff? |  |  |  |
| Does the institution document that faculty and academic staff participate in appropriate professional development based on their subject area and responsibilities? |  |  |  |
| Do the professional development opportunities and scholarship support provided align with the institution’s mission and level of programs offered? |  |  |  |
| Do the resources and materials provided to faculty and academic staff include internal and external resources, as appropriate for the institution’s mission and level of programs offered? |  |  |  |
| **Standard IX.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 a 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 X: Academic Policies

1. **Admissions Criteria**

The institution’s admissions criteria align with its mission, program levels, and targeted student population. The admissions criteria are intended to ensure the admission of students who can reasonably be expected to successfully complete the stated educational offerings. Exceptions to admissions criteria are limited and require documentation of a clear and justifiable rationale for the exception.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s admissions policy appropriate and consistent with accepted best practices? |  |  |  |
| Do the institution’s admissions criteria align with its mission, program levels, and its target student population? |  |  |  |
| Does the institution follow an adequate process for developing admissions criteria that verify and document that prospective students can reasonably be expected to complete the stated educational offerings? |  |  |  |
| Does the institution adequately document that students meet established admissions criteria? |  |  |  |
| If the institution enrolls students who do not meet its established admissions criteria, are the institution’s policies and procedures for determining the basis for admittance adequate? |  |  |  |
| Is the institution’s documentation of admissions exceptions adequate and does it clearly indicate that students otherwise meet established admissions criteria? |  |  |  |
| Are admissions exceptions only made under limited and exceptional circumstances? |  |  |  |

**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 a 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. Non-Degree Programs  
   Applicants possess a high school diploma or its recognized equivalent at the time of admission (e.g., high school diploma, general educational development tests [GED], or self-certification statement).

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for non-degree programs? |  |  |  |
| Does the institution allow self-certification? |  |  |  |
| If the institution allows self-certification, are the policy and process followed adequate for verification? |  |  |  |

**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 a 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. Undergraduate Degrees  
   Applicants possess a high school diploma or its recognized equivalent at the time of admission (e.g., high school diploma or general educational development tests [GED]).

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for undergraduate degree programs? |  |  |  |
| Does the institution allow self-certification? |  |  |  |
| If the institution allows self-certification, are the policy and process followed adequate for verification? |  |  |  |

**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 a 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. Master’s Degrees   
   Applicants possess a bachelor’s degree earned from an appropriately accredited institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for master’s degree programs? |  |  |  |

**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 a 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. First Professional Degrees  
   Applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for first professional degree programs? |  |  |  |

**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 a 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. Professional Doctoral Degrees   
   Applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution and relevant academic experience. The institution verifies that applicants have completed 30 graduate-level credit hours prior to admission.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for professional doctoral degree programs? |  |  |  |

**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 a 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. Research Doctoral Degrees Applicants possess a bachelor’s or master’s degree earned from an appropriately accredited institution and relevant academic experience. The institution verifies that applicants have completed 30 graduate-level credit hours prior to admission.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document the basis for admissions decisions for research doctoral degree programs? |  |  |  |

**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 a 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. Dual Degrees   
   Institutions demonstrate that admissions criteria meet commonly accepted practices and ensure that students are adequately prepared to be successful in the educational offering.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution offer dual degrees (or “double degrees” or similar designation)? |  |  |  |
| For each dual degree offering, do the institution’s program admissions criteria meet commonly accepted practices and ensure that students are adequately prepared to be successful in the education offering? |  |  |  |

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

1. **Transfer Credit**

The institution implements a fair and equitable transfer credit policy that is published in the catalog. The steps for requesting transfer credit are clear and disclose the documentation required for review. Students may appeal transfer credit decisions using published procedures. The institution clearly discloses that the transfer of institutional credits to other institutions is at the discretion of the other institution.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s transfer credit policy fair and equitable? |  |  |  |
| Is the institution’s transfer credit policy appropriately published? |  |  |  |
| Is the institution’s process for students requesting transfer credit clear, adequate, and consistent with accepted best practices? |  |  |  |
| Does the institution evaluate transfer credit in a manner consistent with accepted best practices? |  |  |  |
| Does the institution maintain appropriate documentation to substantiate the award of transfer credits? |  |  |  |
| As appropriate for each program level offered, are transfer credit evaluations performed by qualified individuals with experience in evaluating transcripts and academic content equivalency? |  |  |  |
| Does the institution have a clear, published transfer credit appeal procedure? |  |  |  |
| Does the institution clearly disclose that transfer of institutional credits to other institutions is at the discretion of the receiving institution? |  |  |  |
| **Standard X.B. – 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 a 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. **Prior Learning Assessment**

Credit may be awarded for demonstrated learning appropriate for the level, subject, and amount of credit awarded based on the student’s prior professional/military experience, training, credit recommendation services, or other educational experiences outside of traditional academic learning consistent with CAEL’s Ten Standards for Assessing Learning (Available in Part IV, Appendix XV, DEAC Accreditation Handbook).The institution must publish its prior learning assessment policy in its catalog. Institutions maintain official documentation of the evidence of prior learning and the rationale of the instances of awarding credit for prior learning.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution award credit for prior learning? |  |  |  |
| Are the institution’s policies for assessment of prior learning appropriately published? |  |  |  |
| For each type of prior learning offered by the institution, is the process by which students are required to demonstrate/document their prior learning adequate? |  |  |  |
| Are the institution’s policies and evaluation criteria for awarding credit for prior learning fair and equitable, and is the rationale for credited awarded appropriately documented? |  |  |  |
| Is prior learning assessment performed by qualified individuals with experience in evaluating prior learning? |  |  |  |
| For educational experiences outside of traditional academic learning, are institution’s policies and procedures appropriately aligned with CAEL’s Ten Standards for Assessing Learning? |  |  |  |
| **Standard X.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 a 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 XI: Recruitment and Enrollment

1. **Student Recruitment**

The institution demonstrates that ethical processes and procedures are followed throughout the recruitment of prospective students. The qualifications and experience of the institution’s recruitment personnel are aligned to identified roles and responsibilities. Recruitment personnel are trained in the tasks and expectations of their positions. Authorized recruitment personnel are provided with appropriate materials to perform their tasks and are routinely monitored to ensure compliance with laws applicable to the jurisdiction(s) in which the institution operates, the DEAC Code of Ethics, and institutional policy. The institution takes full responsibility for the actions of its recruitment personnel, whether internal or third party.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution follow effective processes and procedures for enrolling prospective students? |  |  |  |
| Does the institution follow ethical processes and procedures when enrolling prospective students? |  |  |  |
| Are the qualification and experience requirements for the institution’s recruitment personnel adequate for their identified roles and responsibilities? |  |  |  |
| Does the institution appropriately train student recruitment personnel in institution policies, processes, and expectations? |  |  |  |
| Are the materials provided to recruitment personnel adequate to ensure that tasks are performed ethically, consistently, and in compliance with applicable laws, DEAC standards, and institutional policies? |  |  |  |
| Does the institution have an adequate process in place to verify that recruitment materials comply with laws applicable to the jurisdiction(s) in which it operates and DEAC recruitment practice requirements? |  |  |  |
| Did the institution provide evidence that all student recruitment personnel sign the DEAC Code of Ethics? |  |  |  |
| Does the institution adequately supervise and monitor both internal and third-party student recruitment personnel? |  |  |  |
| Does the institution have adequate processes and criteria in place to evaluate both internal and third-party student recruitment personnel? |  |  |  |
| **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 a 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. **Verification of Student Identity**

Student identity verification processes begin during the enrollment and onboarding of students and continue with respect to the student’s enrollment in subsequent programs/classes.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have an adequate process for verifying student identity during admission (initial enrollment) and onboarding? |  |  |  |
| Does the institution have an adequate process for verifying student identity throughout their subsequent program/course enrollment? |  |  |  |
| **Standard XI.B. – 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 a 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. **Compulsory Age**

Institutions enrolling students under the compulsory school age obtain permission from responsible parties to assure that the pursuit of the educational offerings is not detrimental to any compulsory schooling.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution obtain permission from responsible parties prior to enrolling compulsory school aged students? |  |  |  |
| Does the institution follow a process for verifying and documenting that the pursuit of educational offerings by a compulsory school aged student is not detrimental to any compulsory schooling? |  |  |  |
| **Standard XI.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 a 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. **Enrollment Agreements**

The institution’s enrollment agreements/documents are in the language of instruction and clearly identify the educational offering and the credential awarded. The agreements inform applicants of the rights, responsibilities, and obligations of both the student and the institution prior to applicant signature. The institution complies with the DEAC Enrollment Agreements Disclosures Checklist.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s enrollment agreements/documents in the language of instruction? |  |  |  |
| Do the institution’s enrollment agreements/documents clearly identify the education offering and the credential awarded upon program completion? |  |  |  |
| Do the institution’s enrollment agreements/documents verify that each applicant is fully informed of the rights, responsibilities, and obligations of both the student and the institution prior to the applicant’s signature? |  |  |  |
| Does the institution comply with the DEAC enrollment agreement disclosures checklist? |  |  |  |
| Does the institution follow an adequate process for accepting and processing enrollment agreements? |  |  |  |
| Does the institution appropriately incorporate any payment contract into the enrollment agreement/documents, or is any payment contract provided in conjunction with the enrollment agreement completion process? |  |  |  |
| **Standard XI.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 a 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. **Admission Process**

The institution verifies that all admissions requirements are met prior to admission and collects appropriate evidence, such as official transcripts and English Language proficiency documentation, to support eligibility. English language proficiency is verified for applicants whose native language is not English and who have not earned a degree from an appropriately accredited institution where English is the principal language of instruction. Such verification procedures align with DEAC’s guidance on English Language Proficiency Assessment located in Appendix IX. The institution documents the basis for any denial of admission. Official transcripts, if required for admission, must be received within a defined enrollment period not to exceed 12 semester credit hours. Students who do not submit required official transcripts within the prescribed period are administratively withdrawn.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution adequately document that all admissions requirements are met prior to offering admission to a student? |  |  |  |
| Does the institution adequately document the basis for any denial of admission? |  |  |  |
| Does the institution follow adequate procedures for informing applicants of their acceptance or denial of admission? |  |  |  |
| If the institution allows students to begin enrollment prior to receiving official transcripts, is the enrollment period allowed for receipt clearly defined and less than or equal to 12 semester credit hours or equivalent? |  |  |  |
| Does the institution follow an adequate process for verifying that official transcripts are received within the defined enrollment period? |  |  |  |
| Does the institution withdraw students when official transcripts are not received within the defined enrollment period? |  |  |  |
| Does the institution follow adequate processes for evaluating transcripts that are not in English (or other language if the prior educational transcripts are not in the language of instruction)? |  |  |  |
| Does the institution publish appropriate admissions requirements for foreign transcript evaluation? |  |  |  |
| Does the institution use appropriate third-party transcript evaluators? |  |  |  |
| Do the institution’s transcript evaluators possess expertise in the educational practices of the country of origin? |  |  |  |
| Does the institution follow adequate processes for verifying published language proficiency requirements? |  |  |  |
| Does the institution publish appropriate language proficiency requirements? |  |  |  |
| Do the institution’s foreign language verification procedures align with DEAC’s guidance on English Language Proficiency Assessment as disclosed in DEAC Handbook, Part Four: Appendix IX? Or, does the institution have an equivalent policy if the language of instruction is other than English? |  |  |  |
| **Standard XI.H. – 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 a 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 XIII: Fair Practices

1. **Advertising and Promotion**

The institution conforms to ethical practices in all advertising and promotion to prospective students. The institution’s processes and procedures ensure that all advertisements, website content, and other marketing collateral is truthful, accurate, and clearly stated. The institution complies with DEAC’s Catalog Disclosures Checklist and DEAC’s Website Disclosures Checklist.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Did the institution describe its approach to advertising and promotion of its programs? |  |  |  |
| Did the institution identify who is responsible for the institution’s marketing and advertising decisions? |  |  |  |
| Is the individual responsible for the institution’s marketing appropriately qualified by education or experience for this role? |  |  |  |
| Does the institution have adequate processes and procedures in place to verify that all advertisements, website content, and marketing collateral are truthful, accurate, clear? |  |  |  |
| Does the institution comply with the DEAC Catalog Disclosures Checklist? |  |  |  |
| Does the institution comply with the DEAC Website Disclosures Checklist? |  |  |  |
| **Standard XIII.F. – 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 a 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. **Institution and Course Accredited-Status Recognition**

The institution accurately discloses its accredited status and uses the official DEAC accreditation logo and/or statement of accreditation when publishing its accreditation status in advertisements and promotional materials on its website and in social media. DEAC’s name, address, telephone number, and web address are published in the institution’s catalog. Institutions publish a statement of accreditation only as follows:

* Accredited by the Distance Education Accrediting Commission
* DEAC Accredited

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution accurately disclose its accredited status, in compliance with the content requirements disclosed by DEAC Standard XIII.G.? |  |  |  |
| **Standard XIII.G. – 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 a 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. **Truth in Lending**

The institution complies with all applicable Truth in Lending Act (TILA) requirements, including those under Regulation Z, and state requirements for retail installment agreements.

|  |  |  |  |
| --- | --- | --- | --- |
| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution in compliance with applicable Truth in Lending Act (TILA) requirements, including those under Regulation Z, and state requirements for retail installment agreements? |  |  |  |
| Does the institution employ an individual responsible for verifying compliance with all Truth in Lending Act (TILA) requirements? |  |  |  |
| Does the identified individual participate in adequate activities to remain up to date on Truth in Lending Act (TILA) requirements? |  |  |  |
| Does the institution publish all required state and Truth in Lending Act (TILA) disclosures on the enrollment agreement? |  |  |  |
| **Standard XIII.H. – 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 a 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 XIV: Finance[[1]](#footnote-1)

* 1. **Financial Practices**

The institution provides on an annual basis complete, comparative financial statements covering its two most recent fiscal years’ financial statements that are audited and prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America or the International Financial Reporting Standards (IFRS). In the event the operations of the institution are supported in whole or in part by a parent company or a third party, the Commission may require audited financial statements from the parent or third party to demonstrate that the entity possesses sufficient financial resources to provide the institution continued financial sustainability. If the institution’s financial performance is included within the parent corporation’s statements, a supplemental schedule for the individual institution is appended to the parent statement, and inter-company transactions are clearly identified and defined. 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.

**[Note:** Throughout this Standard,compliance assessment questions refer only to audited comparative financial statements to align with the Standard as written. See the footnote for Standard XIV, regarding continued allowable submission of reviewed comparative financial statements through mid-2026 and adjust findings feedback accordingly].

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s audited comparative financial statements demonstrate financial responsibility? |  |  |  |
| Does the institution maintain sufficient resources to meet its financial obligations and provide quality educational offerings and service to students? |  |  |  |
| Are the institution’s financial statements regularly audited? |  |  |  |
| Did the institution submit its most recent fiscal year end audited comparative financial statements, opinion letter, and letter of financial statement validation? |  |  |  |
| Are the institution’s financial statements prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America or the International Financial Reporting Standards (IFRS)? |  |  |  |
| Are the institution’s budgeting processes adequate, and do they conform to accepted best practices? |  |  |  |
| Are the individuals responsible for creating and monitoring the institution’s budget qualified by education and experience? |  |  |  |
| Does the institution’s budgeting process document and verify that current and future operating results are sufficient to allow it to accomplish its mission and goals? |  |  |  |
| Is the institution supported by a parent company or third party? |  |  |  |
| If the institution is supported by a parent company or third party, does the supporting entity possess sufficient financial resources to provide the institution with continued financial sustainability? |  |  |  |
| Is the parent company or third party’s stated commitment to supporting the institution sufficient? |  |  |  |
| Is the supporting entity’s level of administrative and financial involvement adequate to promote the institution’s continued financial sustainability? |  |  |  |
| If the institution’s financial performance is included within the parent corporation or third party’s financial statements, did the institution provide adequate supplemental schedules disclosing its individual financial status? |  |  |  |
| If the institution’s financial performance is included within the parent corporation or third party’s financial statements, did the institution provide adequate supplemental schedules which clearly identify and defines inter-company transactions? |  |  |  |
| **Standard XIV.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 a 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. **Financial Management**

Individuals overseeing the fiscal and budgeting processes are qualified by education and experience. The institution maintains adequate administrative staff and other resources to operate effectively within fiscal and budgeting constraints, consistent with its representations of the scope and quality of its educational offerings as guided by its mission statement and strategic plan. Any risk that exists is adequately monitored, manageable, and insured. The institution has adequate administrative resources for effective operations, and at least one person is qualified and able to prepare accurate financial reports in a timely manner. Documentation protocols and controls are in place to assure that finances are properly managed, monitored, and protected.

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| **Questions** | **Yes** | **No** | **N/A** |
| Are the individuals responsible for preparing the institution’s financial reports and budgets qualified by education and experience? |  |  |  |
| Are financial reports and budgets regularly prepared? |  |  |  |
| Does the institution employ an individual, internally or a third party, who is responsible for reviewing and approving financial reports and budgets? |  |  |  |
| Does the institution maintain adequate administrative resources to operate effectively within fiscal and budgeting constraints? |  |  |  |
| Are risks appropriately monitored, managed, and insured? |  |  |  |
| Does the institution maintain adequate insurance coverage? |  |  |  |
| Has the institution filed any significant insurance claims in the past five years? |  |  |  |
| Does the institution have adequate protocols and controls in place to verify that finances are properly managed, monitored, and protected? |  |  |  |
| Do the institution’s accounts payable (numbers, amounts, and age) reflect sound financial responsibility and management? |  |  |  |
| **Standard XIV.B. – 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 a 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. **Financial Stability and Sustainability**

Financial statements must reflect that the institution has sufficient resources to meet the institution’s financial obligations to provide quality instruction and service to its students for the full period of each student’s enrollment, consistent with the institution’s program representations.

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| **Questions** | **Yes** | **No** | **N/A** |
| Do the institution’s financial statements reflect sufficient resources to meet its financial obligations to provide quality instruction and service to its students for the full period of students’ enrollment, as represented to the public? |  |  |  |
| Is the institution profitable? For nonprofits, does the institution have an excess of revenues over costs? |  |  |  |
| If the institution is not profitable, has the institution implemented strategic initiatives to achieve a positive operating result sufficient to fund future operations? |  |  |  |
| Does the institution have the resources necessary to fulfill all obligations to students in the event that a teach-out is required? |  |  |  |
| Does the institution use cost control and analysis systems to verify that it maintains sufficient current assets to fund a teach-out of students? |  |  |  |
| Have the institution’s owner(s) or governing board members ever declared bankruptcy? |  |  |  |
| If the institution is a sole proprietorship or partnership, have the owner(s), governing board members, chief executive officer, or top institution administrators have ever declared bankruptcy? |  |  |  |
| Does the institution maintain reserves for honoring future service obligations, bad debts, and refunds? |  |  |  |
| **Standard XIV.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 a 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. **Financial Reporting**

Annual financial statements are prepared in conformity with generally accepted accounting principles in the United States of America, often referred to as “GAAP”, including the accrual method of accounting. An independent certified public accountant (CPA) audit report accompanies these statements. At its discretion, the Commission may require additional financial reporting from the institution.

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| **Questions** | **Yes** | **No** | **N/A** |
| Are the institution’s financial statements prepared in conformity with generally accepted accounting principles (GAAP) in the United States of America or the International Financial Reporting Standards (IFRS)? |  |  |  |
| Does the institution use the accrual method of accounting? |  |  |  |
| Is the institution’s independent auditing firm qualified and experienced? |  |  |  |
| Did the independent auditor identify any deviations while conducting the institution’s audit? |  |  |  |
| If applicable, did the institution identify how it plans to address and resolve any identified challenges, anomalies, or threats? |  |  |  |
| Does the institution have procedures that enable it to continue operations if it received a going concern or liquidity footnote opinion from the independent auditing firm? |  |  |  |
| If a going concern or liquidity uncertainty was resolved through continued shareholder support, did the institution explain why the independent auditing firm did not accept the support as sufficient to avoid the going concern opinion or liquidity note? |  |  |  |
| Did the institution certify that it understands that the Commission may, in its discretion, require that the institution deliver additional financial reporting as deemed necessary when circumstances raise questions as to the institution’s financial soundness and stability? |  |  |  |
| **Standard XIV.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 a 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 XV: Facilities and Records Maintenance

1. **Records Protection**

The institution’s financial and administrative records, as well as students’ financial, educational, and personal information, are securely and confidentially maintained in accordance with laws applicable to the jurisdiction(s) in which the institution operates and with professional requirements.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution have adequate procedures for maintaining financial and administrative records, as well as students’ financial, educational, and personal information? |  |  |  |
| Does the institution follow proactive steps to safeguard the security and confidentiality of financial and administrative records, as well as students’ financial, educational, and personal information? |  |  |  |
| Do the institution’s record maintenance and protection procedures comply with laws applicable to the jurisdiction(s) in which the institution operates, as well as with professional requirements? |  |  |  |
| Are physical records adequately secured on site? |  |  |  |
| Are digital records adequately secured and backed up to minimize data loss? |  |  |  |
| **Standard XV.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 a 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 laws applicable to the jurisdiction(s) in which the institution operates. The institution implements a comprehensive document retention policy. Transcripts are readily accessible and are maintained permanently in either print or digital form.

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| **Questions** | **Yes** | **No** | **N/A** |
| Does the institution follow adequate processes for retaining financial, administrative, and student records in accordance with the laws applicable to the jurisdiction(s) in which the institution operates? |  |  |  |
| Did the institution state how long financial records are maintained? |  |  |  |
| Did the institution state how long administrative records are maintained? |  |  |  |
| Did the institution state how long student records are maintained? |  |  |  |
| Does the institution implement an adequate comprehensive document retention policy? |  |  |  |
| Did the institution identify those responsible for ensuring the proper retention of financial, administrative, and student records? |  |  |  |
| Does the institution conduct regular internal audits for compliance with all applicable federal and state laws? |  |  |  |
| Is transcript information readily accessible and permanently maintained in order for the institution to produce an official transcript in a timely manner? |  |  |  |
| **Standard XV.B. – 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 a 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. **Facilities, Equipment, and Supplies**

The institution’s primary facility is located in a professional, institution-branded space authorized by local authorities for mixed use or commercial use. The institution maintains a written facilities plan and budget allocations to maintain facilities, equipment, and supplies to support its educational offerings, student support services, and administrative operations on a sustainable basis. Buildings, workspaces, and equipment comply with local fire, building, health, and safety regulations.

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| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s primary facility located in a professional, institution-branded space which is authorized by local authorities for mixed use or commercial use? |  |  |  |
| Do the institution’s facilities, equipment, and supplies support its educational offerings, student support services, and administrative operations on a sustainable basis? |  |  |  |
| Is the institution’s technical infrastructure adequate to support its educational offerings, student support services, and administrative operations on a sustainable basis? |  |  |  |
| Does the institution have a sufficient plan for maintenance that includes upgrades of its facilities, equipment, and supplies? |  |  |  |
| Does the institution have adequate financial resources and budgets to maintain and upgrade its facilities and equipment? |  |  |  |
| Do the institution’s building, workspace, and equipment comply with local fire, building, health, and safety regulations? |  |  |  |
| **Standard XV.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 a 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. **Protection of Physical Sites and Virtual Infrastructure**

The institution’s physical location(s) and virtual infrastructure are adequate to secure financial, administrative, and student educational records; are reasonably accessible; and are adequately protected in accordance with laws applicable to the jurisdiction(s) in which the institution operates. An adequate disaster response and recovery plan is in place that includes mitigation of risks, i.e., at a minimum, the ability to sustain and support continuing academic operations, the protection of student information consistent with applicable law, and the mitigation of other risks presented by physical, environmental, cybersecurity, force majeure, and other reasonably foreseeable threats.

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| **Questions** | **Yes** | **No** | **N/A** |
| Is the institution’s physical location adequate to secure physical financial, administrative, and student educational records, while ensuring that they are reasonably accessible for use? |  |  |  |
| Is the institution’s virtual infrastructure adequate to secure digital financial, administrative, and student educational records, while ensuring that they are reasonably accessible for use? |  |  |  |
| Are institutional records adequately protected in accordance with laws applicable to the jurisdiction(s) in which the institution operates and in response to foreseeable physical or cybersecurity risks? |  |  |  |
| Does the institution have appropriate disaster response and recovery procedures for its physical and environmental location(s)? |  |  |  |
| Does the institution’s disaster response and recovery plan include contingencies to sustain and support continued academic operations and protect student information, consistent with applicable law? |  |  |  |
| **Standard XV.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 a 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. The implementation and submission timeframe of Standard XIV.A.’s requirement that institutions provide audited comparative financial statements (reviewed comparative financial statements will no longer be accepted) is as follows: For institutions with fiscal years ending between January 1, 2025, and June 30, 2025, audited financial statements are due by December 31, 2025. For institutions with fiscal years ending between July 1, 2025, and December 31, 2025, audited financial statements are due by June 30, 2026. In both cases, the Commission is waiving the requirement for comparative statements and accepting audits of one fiscal year. Future submissions of audited statements (submitted after June 30, 2026) must be prepared on a comparative basis. [↑](#footnote-ref-1)