Handbook of Accreditation

2008

WASC

ACCREDITING COMMISSION FOR
SENIOR COLLEGES AND UNIVERSITIES

THE WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES

The Western Association of Schools and Colleges (WASC)[1] is one of the six regional accrediting associations in the United States. WASC was formed on July 1, 1962, to evaluate and accredit schools, colleges, and universities in California, Hawaii, the territories of Guam, American Samoa, Federated States of Micronesia, Republic of Palau, and the Commonwealth of the Northern Mariana Islands. WASC functions through a board of directors and three accrediting commissions: the Accrediting Commission for Senior Colleges and Universities, the Accrediting Commission for Community and Junior Colleges, and the Accrediting Commission for Schools. The board of directors consists of nine members, with each accrediting commission electing three members.

Each commission, with the involvement of all participating institutions, develops its own standards, procedures, and fiscal policies, under the authority and subject to the approval of the WASC board of directors. The accreditation actions of each commission are certified annually by the board of directors of WASC. Accreditation ceases whenever an institution fails to pay its annual fees, requests in writing that its accreditation be withdrawn, or when the Commission formally acts to terminate accreditation.

This Handbook of Accreditation covers Standards of Accreditation, the Institutional Review Process, and Commission Decisions on Institutions for the Accrediting Commission for Senior Colleges and Universities. It should be used in conjunction with published policies and practices of the Accrediting Commission for Senior Colleges and Universities, which are available on the Commission's website: *www.wascsenior.org*.

The Accrediting Commission for Senior Colleges and Universities reserves the right to make changes to this Handbook and all related policies and procedures at any time, in order to comply with new federal requirements or in response to new needs in the region. Institutions should refer to the Commission's website for the most recent versions of all publications.

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[1] *The WASC Constitution and a list of accredited institutions can be found on the WASC web site at www.wascweb.org. For a list of other regional accrediting associations and related bodies, see the Accrediting Commission for Senior Colleges and Universities website at www.wascsenior.org.*

HANDBOOK OF ACCREDITATION

- STANDARDS
- INSTITUTIONAL REVIEW PROCESS
- COMMISSION DECISIONS ON INSTITUTIONS

JULY 2008

ACCREDITING COMMISSION FOR
SENIOR COLLEGES AND UNIVERSITIES

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USER'S GUIDE TO THE HANDBOOK OF ACCREDITATION

This Handbook of Accreditation is intended to serve a variety of readers: representatives of institutions accredited by the Commission or those seeking review; chairs and members of evaluation teams; those interested in establishing good practices in higher education and the process of evaluation; and the general public interested in or affected by higher education. In addition, the Handbook has been designed to serve several purposes: to identify the Core Commitments and accreditation standards to be addressed in the accreditation review process, to guide institutions through institutional review, and to assist evaluation teams in each stage of review. Each major section is designed to stand alone, as well as fit within the integrated Handbook. The Handbook is purposely not copyrighted so that it may be widely copied and distributed. It is the Commission's goal that through wide dissemination and application, the standards and processes developed in this model of accreditation may inform and contribute to the development of improved institutional practices and reviews throughout the WASC region.

This Handbook is part of a broader and more comprehensive system of support provided by the Accrediting Commission to institutions, evaluators, and members of the public. Important policies and procedures, and additional information supplementing the material found in this Handbook, are available on the Commission's web site (*www.wascsenior.org*) and should be read in conjunction with this Handbook. Guides have also been developed for specific activities, such as Substantive Change and visit preparation. Those guides are also available on the Commission's website.

The Commission welcomes suggestions for improvement of this Handbook and ways to make it, and the accreditation process itself, more useful to institutions and members of the public. Please send all comments and suggestions to the WASC office.

INTRODUCTION 1

Purposes of WASC Accreditation 2
Code of Commission Good Practice and Ethical Conduct 3
The Status of Accreditation 5

THE CORE COMMITMENTS AND STANDARDS 6

Organization of the Standards 8
The Core Commitments 8
Accreditation Standards 9
Format of the Standards 9
Standard 1: Defining Institutional Purposes and Ensuring Educational Objectives 11
Standard 2: Achieving Educational Objectives through Core Functions 14
Standard 3: Developing and Applying Resources and Organizational Structures to Ensure Sustainability 18
Standard 4: Creating an Organization Committed to Learning and Improvement 21

THE INSTITUTIONAL REVIEW PROCESS 23

Introduction 24
Overview of the Accreditation Review Cycle 24
Outcomes of the Accreditation Review Process 25
Stage 1: The Institutional Proposal 26
Stage 2: The Capacity and Preparatory Review 30
Stage 3: The Educational Effectiveness Review 34
Fees and Charges 38

COMMISSION DECISIONS ON INSTITUTIONS 39

Commission Decisions on Institutions 40
Commission Sanctions 42
Summary Sanctions for Unethical Institutional Behavior 44
Commission Review Process 45
Publication of Actions 48
Notification of Decisions 48

APPENDICES 50

Stipulated Policies 51
Glossary 54

I. Introduction

INTRODUCTION

Purposes of WASC Accreditation

Voluntary, non-governmental, institutional accreditation, as practiced by WASC and the other regional accrediting commissions, is a unique characteristic of American education. In many other countries, the maintenance of educational standards is a governmental function and compliance with government standards is mandatory. No institution in the United States is required to seek accreditation. However, because accreditation brings a variety of widely recognized benefits, most of the eligible institutions in this country have sought to become accredited by regional accrediting commissions.

The effectiveness of self-regulatory accreditation depends upon the institution's acceptance of specific responsibilities. Every institution that desires recognition by WASC is expected to demonstrate that it meets the Core Commitments to Institutional Capacity and Educational Effectiveness. The institution is expected to comply with all of the Standards of Accreditation and abide by the Commission's policies, procedures, and decisions. The accreditation process likewise assumes that each institution has the responsibility to participate in the peer review process and accept an honest assessment of institutional strengths and weaknesses.

The Commission accredits institutions, and its accreditation extends to all programs offered by an institution. In addition to assessing academic quality and educational effectiveness, the Commission evaluates institutional structures, processes, and resources.

The accreditation process is intended to:

1. Assure the educational community, the general public, and other organizations and agencies that an accredited institution meets the Commission's Core Commitments to Institutional Capacity and Educational Effectiveness and has been reviewed under Commission Standards;
2. Promote institutional engagement on issues of educational effectiveness and student learning;
3. Develop and share good practices in assessing and improving the teaching and learning process;
4. Develop and apply standards to review and improve educational quality and institutional performance, and validate and revise these standards through ongoing research and feedback;
5. Promote within institutions a culture of evidence, through which indicators of performance are regularly developed and data are collected to inform institutional decision making, planning, and improvement;
6. Develop systems of institutional review and evaluation that adapt to institutional context and purposes, build on institutional evidence, support rigorous reviews, reduce the burden of accreditation, and add value to the institution;
7. Promote active interchange of ideas among all institutions to improve institutional performance, educational effectiveness, and the process of peer review.

Commission Code of Good Practice and Ethical Conduct

In carrying out its functions, the Commission has established a code of good practice and ethical conduct that applies to its relations with the institutions it serves and to its internal organization and procedures.

The Commission is committed to:

1. Appraise institutions in terms of their own stated purposes within the context of Commission Standards, and interpret the Standards in ways that are relevant to the character of the particular institution, respecting institutional integrity and diversity;

2. Emphasize the value and importance of institutional self-evaluation and the development of appropriate evidence to support the accreditation review process;

3. Assist and stimulate improvement in the educational effectiveness of the institution, including the review and improvement of student learning;

4. Conduct evaluation visits using experienced and qualified peers, under conditions that promote impartial and objective judgment and avoid conflict of interest;

5. Provide the institution a reasonable period of time to comply with the Commission's requests for information and documents;

6. Protect the confidentiality of information pertaining to institutions;

7. Include on evaluation teams representatives from institutions of similar purposes and academic programs;

8. Provide institutions an opportunity to object, for cause, to individual members assigned to their evaluation teams, with special concern for possible conflict of interest;

9. Arrange for interviews with administration, faculty, students, and governing board members during the accreditation review process, and include a publicized opportunity for open meetings;

10. Provide institutions due process concerning accrediting decisions made by the Commission. To effectuate this commitment, institutions are provided an opportunity to respond in writing to draft team reports in order to correct errors of fact; to respond in writing to final team reports on issues of substance; and to appear before the Commission when reports are considered. The Commission staff notifies the institution in writing as soon as reasonably possible after Commission decisions are made and includes in its correspondence the reasons for actions taken. The institution may formally appeal Commission actions as described in Section IV, Commission Decisions on Institutions (page 44).

11. Provide an opportunity for institutional representatives and the general public to attend portions of Commission meetings devoted to policies and other non-confidential matters (see policy on *Public Access to the Commission* on the Commission website);

12. Encourage institutions to engage in widespread discussion and serious consideration of Commission actions and the issues highlighted by the Commission in its action letters to the institution;

13. Request a written response from an institution, or refer a matter to the next evaluation team, when the Commission finds that an institution may be in violation of Commission Standards or policies. If a written report is requested and the response is not deemed adequate, the staff may request supplemental information or schedule a fact-finding visit to the institution. The institution will bear the expense of such a visit.

14. Visit institutions at periodic intervals, as specified in the Institutional Review Process;

15. Permit withdrawal of a request for candidacy or initial accreditation at any time (even after evaluation) prior to final action by the Commission. This privilege does not apply to other types of visits;

16. Terminate accreditation or candidacy only after advance written notice;

17. Encourage continuing communication between the Commission and institutions through the accreditation liaison officer position at each institution (see policy on the *Accreditation Liaison Officer* on the Commission website);

18. Maintain and implement a conflict of interest policy for visiting teams, members of the Commission, and Commission staff, to assure fairness and avoid bias (see "Federally Mandated Policies, Conflict of Interest [602.15(a)(6)]" on the Commission website);

19. Provide formal means by which institutions and others can comment on the effectiveness of the accreditation review process, standards, and policies, and conduct ongoing and regular reviews to make necessary changes.

The Status of Accreditation

The status of accreditation indicates that an institution has fulfilled the requirements for accreditation established by this *Handbook.* This means that the institution has:

1. Demonstrated that it meets the Core Commitments to Institutional Capacity and Educational Effectiveness;
2. Conducted a self-review under the Standards of Accreditation, developed and presented indicators of institutional performance, and identified areas for improvement;
3. Developed an approved Institutional Proposal for accreditation and been evaluated by teams of peer evaluators in the Capacity and Preparatory and Educational Effectiveness Reviews;
4. Demonstrated to the Commission that it meets or exceeds the expectations of the Standards of Accreditation;
5. Committed itself to institutional improvement, periodic self-evaluation, and continuing compliance with Commission Standards, policies, procedures and decisions.

Accreditation is attained following the evaluation of the entire institution and continues until formally terminated or withdrawn. It is subject, however, to periodic review and to conditions, as determined by the Commission. Every accredited institution files an Annual Report, is visited by WASC at least every ten years, and undergoes a comprehensive self-review and evaluation at least every ten years. Initial accreditation, as a matter of Commission policy, requires institutional self-review and peer evaluation no more than seven years after the date of the Commission action granting such status. Neither accreditation nor candidacy is retroactive. (Under certain circumstances, the Commission may set the effective date of accreditation up to six months prior to the Commission's action. See *How to Become Accredited* on the Commission website.)

As a voluntary, nongovernmental agency, the Commission does not have the responsibility to exercise the regulatory control of state and federal governments or to apply their mandates regarding collective bargaining, affirmative action, health and safety regulations, and the like. Furthermore, the Commission does not enforce the standards of specialized accrediting agencies, the American Association of University Professors, or other nongovernmental organizations, although institutions may wish to review the publications of such agencies as part of the self-review process. The Commission has its own Standards and expects institutions and teams to apply them with integrity, flexibility and an attitude of humane concern for students and the public interest.

The Standards of Accreditation apply to all institutions in the region. For those seeking candidacy and initial accreditation, the Standards must be met at least at a minimum level. For institutions seeking reaffirmation of accreditation, the Standards must be met at a higher level. The Standards define normative expectations and characteristics of excellence, and provide a framework for institutional self-review. Depending upon the stage of development of the institution, some components of the Standards may be viewed as of greater or lesser priority.

II. The Core Commitments and Standards

WASC CORE COMMITMENTS AND STANDARDS

Standard 1:

Defining Institutional Purposes and Ensuring Educational Objectives

Standard 2:

Achieving Educational Objectives Through Core Functions

Standard 3:

Developing and Applying Resources and Organizational Structures to Ensure Sustainability

Standard 4:

Creating an Organization Committed to Learning and Improvement

ORGANIZATION OF THE STANDARDS

The Core Commitments

The institutions accredited by WASC represent a remarkable range in terms of mission, size, and relative maturity. They are bound together, however, by a common pair of commitments – to institutional capacity and to educational effectiveness. The WASC process begins by asking institutions to ground their efforts in these two commitments. In this way, each institution connects more closely to its own distinctive character and to its responsibilities to its stakeholders. By reaffirming these core commitments, the institution more fully owns both the process and the outcomes of an accreditation review.

CORE COMMITMENT TO INSTITUTIONAL CAPACITY

The institution functions with clear purposes, high levels of institutional integrity, fiscal stability, and organizational structures to fulfill its purposes.

The Core Commitment to Institutional Capacity enables the institution to consider resource issues from a holistic perspective, and to consider capacity as an institutional attribute beyond minimum compliance and a review of assets. Looking at itself through a "lens" of institutional capacity enables the institution to reexamine what it *is* in terms of its capacity to fulfill its aspirations, and to integrate and synthesize findings and recommendations for improvement gained through its self-review under Commission Standards. While the Standards provide an opportunity to review institutional performance within a defined area, the framework of institutional capacity allows an institution to explore cross-cutting issues such as whether resources, structures and processes are aligned with the institution's mission and priorities, and whether the institution has the capacity to measure, interpret, and use evidence about its effectiveness. An important dimension of institutional capacity is the institution's readiness to define and sustain educational effectiveness. This dimension is reflected in the review cycle by the name assigned to the first review, the Capacity and *Preparatory* Review.

CORE COMMITMENT TO EDUCATIONAL EFFECTIVENESS

The institution evidences clear and appropriate educational objectives and design at the institutional and program level. The institution employs processes of review, including the collection and use of data, that ensure delivery of programs and learner accomplishments at a level of performance appropriate for the degree or certificate awarded.

The Core Commitment to Educational Effectiveness provides an opportunity for the institution to explore holistically its approaches to educational effectiveness. The institution assesses whether its systems, such as course and program design, faculty support, and program review, are effectively linked to evidence of student learning and are consistent with the educational goals and the academic standards of the institution. By design, elements of educational effectiveness are incorporated into all four Commission Standards, so that institutions explore the relationships between capacity and educational quality and effectiveness. Each of the four Accreditation Standards describes key elements of educational effectiveness.

ACCREDITATION STANDARDS

To help institutions and others interpret and apply the Core Commitments to Institutional Capacity and Educational Effectiveness, the Commission has defined Standards for accreditation. These Standards are intended to serve several purposes:

- To guide institutions in self-review as a basis for assessing institutional performance and identifying areas in need of improvement
- To provide a framework for institutional presentations to the Commission and review teams
- To serve as the basis for judgment by evaluation teams in the institutional review process
- To provide a foundation for Commission actions and the basis for required institutional follow up to such actions
- To assist those involved in the accrediting process, in higher education generally, and members of the public, in defining institutional quality and educational effectiveness and in promoting the development and sharing of practices that lead to improved quality.

FORMAT OF THE STANDARDS

Each Standard is constructed with the following interrelated elements:

The Standard

Each standard is set forth in broad holistic terms that are applicable to all institutions. Within each standard are two or more major categories under which the standard is more specifically defined. To emphasize the holistic manner in which the contents of each Standard are viewed and applied, judgments will be made, to the extent possible, at the level of the Standard itself. Each of the four Standards begins with a "statement of the Standard," defining the basis for judgment. Within each Standard are sub-sections that define topical areas that are essential to the Standard itself.

Criteria for Review

Within each sub-section are Criteria for Review (CFRs), intended to identify key areas for the review under each Standard. Criteria for Review are meant to support basic decisions about accreditation and to enable the Commission to render an effective judgment on the performance of an institution.

Guidelines

Guidelines identify expected forms or methods for demonstrating performance related to certain Criteria for Review. By design, the Commission has not developed a Guideline for each Criterion for Review. Where Guidelines are identified, the Commission is seeking to assist institutions in interpreting the Criteria for Review by providing examples of how institutions can demonstrate that they have addressed them. For example, a substantial core of full-time faculty would be commonly expected as part of an institution's demonstration that it has addressed Criterion for Review 3.2. The Commission is interested in demonstrated results rather than a specific form of institutional practice. If an institution chooses not to employ the practices described in a particular Guideline, the institution is responsible for showing that it has addressed the intent of that Criterion in an equally effective way.

Related Commission Policies

The Commission has adopted policies and statements that apply to all candidate and accredited institutions. These policies and statements represent official Commission positions, and institutions are expected to adhere to their provisions. Institutions and teams are also expected to include references to relevant policies as part of the accreditation review process.

Following each of the four Standards are references to policies that are of particular relevance to those Standards and the related CFRs and Guidelines. These references are not intended to be all-inclusive. Institutions are encouraged to become familiar with, and to review periodically, all Commission policies and statements.

Commission policies are collected and published on the Commission website.

STANDARD 1

DEFINING INSTITUTIONAL PURPOSES AND ENSURING EDUCATIONAL OBJECTIVES

- Institutional Purposes
- Integrity

The institution defines its purposes and establishes educational objectives aligned with its purposes and character. It has a clear and conscious sense of its essential values and character, its distinctive elements, its place in the higher education community, and its relationship to society at large. Through its purposes and educational objectives, the institution dedicates itself to higher learning, the search for truth, and the dissemination of knowledge. The institution functions with integrity and autonomy.

Institutional Purposes

Criteria for Review

1.1 The institution's formally approved statements of purpose and operational practices are appropriate for an institution of higher education and clearly define its essential values and character.

{GUIDELINES: The institution has a published mission statement that clearly describes its purposes. The institution's purposes fall within recognized academic areas and/or disciplines, or are subject to peer review within the framework of generally recognized academic disciplines or areas of practice.

1.2 Educational objectives are clearly recognized throughout the institution and are consistent with stated purposes. The institution develops indicators for the achievement of its purposes and educational objectives at the institutional, program, and course levels. The institution has a system of measuring student achievement, in terms of retention, completion, and student learning. The institution makes public data on student achievement at the institutional and degree level, in a manner determined by the institution.

1.3 The institution's leadership creates and sustains a leadership system at all levels that is marked by high performance, appropriate responsibility and accountability.

Integrity

Criteria for Review

1.4 The institution publicly states its commitment to academic freedom for faculty, staff, and students, and acts accordingly. This commitment affirms that those in the academy are free to share their convictions and responsible conclusions with their colleagues and students in their teaching and in their writing.

{GUIDELINES: The institution has published or has readily-available policies on academic freedom. For those institutions that strive to instill specific beliefs and world views, policies clearly state how these views are implemented and ensure that these conditions are consistent with academic freedom. Due process procedures are disseminated, demonstrating that faculty and students are protected in their quest for truth.

1.5 Consistent with its purposes and character, the institution demonstrates an appropriate response to the increasing diversity in society through its policies, its educational and co-curricular programs, and its administrative and organizational practices.

{GUIDELINE: The institution has demonstrated institutional commitment to the principles enunciated in the WASC Statement on Diversity.

1.6 Even when supported by or affiliated with political, corporate, or religious organizations, the institution has education as its primary purpose and operates as an academic institution with appropriate autonomy.

{GUIDELINE: The institution has no history of interference in substantive decisions or educational functions by political, religious, corporate, or other external bodies outside the institution's own governance arrangements.

1.7 The institution truthfully represents its academic goals, programs, and services to students and to the larger public; demonstrates that its academic programs can be completed in a timely fashion; and treats students fairly and equitably through established policies and procedures addressing student conduct, grievances, human subjects in research, and refunds.

{GUIDELINES: The institution has published or has readily available policies on student grievances and complaints, refunds, etc. and has no history of adverse findings against it with respect to violation of these policies. Records of student complaints are maintained for a six-year period. The institution clearly defines and distinguishes between the different types of credits it offers and between degree and non-degree credit, and accurately identifies the type and meaning of the credit awarded in its transcripts. The institution has published or readily available grievance procedures for faculty and staff. The institution's policy on grading and student evaluation is clearly stated, and provides opportunity for appeal as needed.

1.8 The institution exhibits integrity in its operations, as demonstrated by the implementation of appropriate policies, sound business practices, timely and fair responses to complaints and grievances, and regular evaluation of its performance in these areas.

{GUIDELINE: The institution's finances are regularly audited by external agencies.

1.9 The institution is committed to honest and open communication with the Accrediting Commission, to undertaking the accreditation review process with seriousness and candor, to informing the Commission promptly of any matter that could materially affect the accreditation status of the institution, and to abiding by Commission policies and procedures, including all substantive change policies.

See related Policies on:

- Complaints and Third Party Comments
- Contracts with Unaccredited Organizations
- Degree-Level Approval Policy
- Disclosure of Accrediting Documents and Commission Actions
- Honorary Degrees
- Institutions with Related Entities
- Maintenance of Accreditation Records
- Overseas International Education Programs for Non-US Nationals
- Statement on Diversity
- Substantive Change

STANDARD 2

ACHIEVING EDUCATIONAL OBJECTIVES THROUGH CORE FUNCTIONS

- Teaching and Learning
- Scholarship and Creative Activity
- Support for Student Learning and Success

The institution achieves its institutional purposes and attains its educational objectives through the core functions of teaching and learning, scholarship and creative activity, and support for student learning and success. It demonstrates that these core functions are performed effectively and that they support one another in the institution's efforts to attain educational effectiveness.

Teaching and Learning

Criteria for Review

2.1 The institution's educational programs are appropriate in content, standards, and nomenclature for the degree level awarded, regardless of mode of delivery, and are staffed by sufficient numbers of faculty qualified for the type and level of curriculum offered.

{GUIDELINE: The content, length, and standards of the institution's academic programs conform to recognized disciplinary or professional standards and are subject to peer review.

2.2 All degrees—undergraduate and graduate—awarded by the institution are clearly defined in terms of entry-level requirements and levels of student achievement necessary for graduation that represent more than simply an accumulation of courses or credits.

{GUIDELINE: Competencies required for graduation are reflected in course syllabi for both General Education and the major.

2.2a. Baccalaureate programs engage students in an integrated course of study of sufficient breadth and depth to prepare them for work, citizenship, and a fulfilling life. These programs also ensure the development of core learning abilities and competencies including, but not limited to, college-level written and oral communication, college-level quantitative skills, information literacy, and the habit of critical analysis of data and argument. In addition, baccalaureate programs actively foster an understanding of diversity, civic responsibility, the ability to work with others, and the capability to engage in lifelong learning. Baccalaureate programs also ensure breadth for all students in the areas of cultural and aesthetic, social and political, as well as scientific and technical knowledge expected of educated persons in this society. Finally, students are required to engage in an in-depth, focused, and sustained program of study as part of their baccalaureate programs.

{GUIDELINE: The institution has a program of General Education that is integrated throughout the curriculum, including at the upper division level, consisting of a minimum of 45 semester units (or the equivalent), together with significant study in depth in a given area of knowledge (typically described in terms of a major).

2.2b. Graduate programs are consistent with the purpose and character of the institution, are in keeping with the expectations of their respective disciplines and professions, and are described through nomenclature that is appropriate to the levels of graduate and professional degrees offered. Graduate curricula are visibly structured to include active involvement with the literature of the field and ongoing student engagement in research and/or appropriate high-level professional practice and training experiences. Additionally, admission criteria to graduate programs normally include a baccalaureate degree in an appropriate undergraduate program.

{GUIDELINES: Institutions offering graduate-level programs employ at least one full-time faculty member for each graduate degree program offered, and demonstrate sufficient resources and structures to sustain these programs and create a graduate-level academic culture.

2.3 The institution's student learning outcomes and expectations for student attainment are clearly stated at the course, program and, as appropriate, institutional level. These outcomes and expectations are reflected in academic programs and policies, curriculum, advisement, library and information resources, and the wider learning environment.

2.4 The institution's expectations for learning and student attainment are developed and widely shared among its members, including faculty, students, staff, and where appropriate, external stakeholders. The institution's faculty takes collective responsibility for establishing, reviewing, fostering, and demonstrating the attainment of these expectations.

2.5 The institution's academic programs actively involve students in learning, challenge them to meet high expectations, and provide them with appropriate and ongoing feedback about their performance and how it can be improved.

2.6 The institution demonstrates that its graduates consistently achieve its stated levels of attainment and ensures that its expectations for student learning are embedded in the standards that faculty use to evaluate student work.

2.7 All programs offered by the institution are subject to systematic program review. The program review process includes analyses of the achievement of the program's learning objectives and outcomes, program retention and completion, and, where appropriate, results of licensing examinations and placement, and evidence from external constituencies such as employers and professional organizations.

Scholarship and Creative Activity

Criteria for Review

2.8 The institution actively values and promotes scholarship, creative activity, and curricular and instructional innovation, as well as their dissemination at levels and of the kinds appropriate to the institution's purposes and character.

{GUIDELINE: Where appropriate, the institution includes in its policies for faculty promotion and tenure the recognition of scholarship related to teaching, learning, assessment, and co-curricular learning.

2.9 The institution recognizes and promotes appropriate linkages among scholarship, teaching, student learning and service.

Support for Student Learning and Success

Criteria for Review

2.10 The institution collects and analyzes student data, disaggregated by demographic categories and areas of study. It tracks achievement, satisfaction, and campus climate to support student success. The institution regularly identifies the characteristics of its students and assesses their preparation, needs, and experiences.

2.11 Consistent with its purposes, the institution develops and assesses its co-curricular programs.

2.12 The institution ensures that all students understand the requirements of their academic programs and receive timely, useful, and regular information and advising about relevant academic requirements.

{GUIDELINE: Recruiting and admission practices, academic calendars, publications, and advertising are accurate, current, complete, and are readily available to support student needs.

2.13 Student support services, including financial aid, registration, advising, career counseling, computer labs, and library and information services, are designed to meet the needs of the specific types of students that the institution serves and the curricula it offers.

2.14 Institutions that serve transfer students provide clear and accurate information about transfer requirements, ensure equitable treatment for such students with respect to academic policies, and ensure that such students are not unduly disadvantaged by transfer requirements.

See related Policies on:

- Collegiate Athletics
- Credit for Prior Experiential Learning
- Distance Education and Technology-Meditated Instruction
- Instruction in Languages Other Than English
- International Students
- Law Schools in California
- Statement on Diversity
- Study Abroad
- Transfer and Award of Academic Credit

STANDARD 3

DEVELOPING AND APPLYING RESOURCES AND ORGANIZATIONAL STRUCTURES TO ENSURE SUSTAINABILITY

- Faculty and Staff
- Fiscal, Physical and Information Resources
- Organizational Structures and Decision-Making Processes

The institution sustains its operations and supports the achievement of its educational objectives through its investment in human, physical, fiscal, and information resources and through an appropriate and effective set of organizational and decision-making structures. These key resources and organizational structures promote the achievement of institutional purposes and educational objectives and create a high quality environment for learning.

Faculty and Staff

Criteria for Review

3.1 The institution employs personnel sufficient in number and professional qualifications to maintain its operations and support its academic programs, consistent with its institutional and educational objectives.

3.2 The institution demonstrates that it employs a faculty with substantial and continuing commitment to the institution. The faculty is sufficient in number, professional qualifications, and diversity to achieve the institution's educational objectives, to establish and oversee academic policies, and to ensure the integrity and continuity of its academic programs wherever and however delivered.

{GUIDELINE: The institution has an instructional staffing plan that includes a sufficient number of full-time faculty with appropriate backgrounds, by discipline and degree level. The institution systematically engages full-time non-tenure track, adjunct, and part-time faculty in such processes as assessment, program review, and faculty development.

3.3 Faculty and staff recruitment, orientation, workload, incentive, and evaluation practices are aligned with institutional purposes and educational objectives. Evaluation processes are systematic, include appropriate peer review, and, for instructional faculty and other teaching staff, involve consideration of evidence of teaching effectiveness, including student evaluations of instruction.

3.4 The institution maintains appropriate and sufficiently supported faculty and staff development activities designed to improve teaching and learning, consistent with its institutional objectives.

{GUIDELINE: The institution provides training and support for faculty members teaching by means of technology-mediated instruction.

Fiscal, Physical, and Information Resources

Criteria for Review

3.5 The institution has a history of financial stability, unqualified independent financial audits and resources sufficient to ensure long-term viability. Resources are aligned with educational purposes and objectives. If an institution has an accumulated deficit, it has realistic plans to eliminate that deficit. Resource planning and development include realistic budgeting, enrollment management, and diversification of revenue sources.

3.6 The institution holds, or provides access to, information resources sufficient in scope, quality, currency, and kind to support its academic offerings and the scholarship of its members. These information resources, services and facilities are consistent with the institution's educational objectives and are aligned with student learning outcomes. For both on-campus students and students enrolled at a distance, physical and information resources, services, and information technology facilities are sufficient in scope and kind to support and maintain the level and kind of education offered.

3.7 The institution's information technology resources are sufficiently coordinated and supported to fulfill its educational purposes and to provide key academic and administrative functions.

Organizational Structures and Decision-Making Processes

Criteria for Review

3.8 The institution's organizational structures and decision-making processes are clear and consistent with its purposes, support effective decision making, and place priority on sustaining effective academic programs.

{GUIDELINE: The institution establishes clear roles, responsibilities, and lines of authority, which are reflected in an organization chart.

3.9 The institution has an independent governing board or similar authority that, consistent with its legal and fiduciary authority, exercises appropriate oversight over institutional integrity, policies, and ongoing operations, including hiring and evaluating the chief executive officer.

{GUIDELINE: The governing body regularly engages in self-review and training to enhance its effectiveness.

3.10 The institution has a full-time chief executive officer. The institution also has a chief financial officer whose primary or full-time responsibility is to the institution. In addition, the institution has a sufficient number of other qualified administrators to provide effective educational leadership and management.

3.11 The institution's faculty exercises effective academic leadership and acts consistently to ensure both academic quality and the appropriate maintenance of the institution's educational purposes and character.

{GUIDELINE: The institution clearly defines the governance roles, rights, and responsibilities of the faculty.

See related Policies on:

- Collective Bargaining
- Institutional Units in a System
- Institutions With Related Entities
- Statement on Diversity

STANDARD 4

CREATING AN ORGANIZATION COMMITTED TO LEARNING AND IMPROVEMENT

- ▹ Strategic Thinking and Planning
- ▹ Commitment to Learning and Improvement

The institution conducts sustained, evidence-based, and participatory discussions about how effectively it is accomplishing its purposes and achieving its educational objectives. These activities inform both institutional planning and systematic evaluations of educational effectiveness. The results of institutional inquiry, research, and data collection are used to establish priorities at different levels of the institution and to revise institutional purposes, structures, and approaches to teaching, learning, and scholarly work.

Strategic Thinking and Planning

Criteria for Review

4.1 The institution periodically engages its multiple constituencies, including faculty, in institutional reflection and planning processes which assess its strategic position, articulate priorities, examine the alignment of its purposes, core functions and resources, and define the future direction of the institution. The institution monitors the effectiveness of its plans and planning processes, and revises them as appropriate.

4.2 Planning processes at the institution define and, to the extent possible, align academic, personnel, fiscal, physical, and technological needs with the strategic objectives and priorities of the institution.

4.3 Planning processes are informed by appropriately defined and analyzed quantitative and qualitative data, and include consideration of evidence of educational effectiveness, including student learning.

Commitment to Learning and Improvement

Criteria for Review

4.4 The institution employs a deliberate set of quality assurance processes at each level of institutional functioning, including new curriculum and program approval processes, periodic program review, ongoing evaluation, and data collection. These processes include assessing effectiveness, tracking results over time, using comparative data from external sources, and improving structures, processes, curricula, and pedagogy.

4.5 The institution has institutional research capacity consistent with its purposes and objectives. Institutional research addresses strategic data needs, is disseminated in a timely manner, and is incorporated in institutional review and decision-making processes. Included in the institutional research function is the collection of appropriate data to support the assessment of student learning. Periodic reviews are conducted to ensure the effectiveness of the research function and the suitability and usefulness of data.

4.6 Leadership at all levels is committed to improvement based on the results of the inquiry, evaluation and assessment that is used throughout the institution. The faculty takes responsibility for evaluating the effectiveness of the teaching and learning process and uses the results for improvement. Assessments of the campus environment in support of academic and co-curricular objectives are also undertaken and used, and are incorporated into institutional planning.

{GUIDELINE: The institution has clear, well-established policies and practices for gathering and analyzing information that lead to a culture of evidence and improvement.

4.7 The institution, with significant faculty involvement, engages in ongoing inquiry into the processes of teaching and learning, as well as the conditions and practices that promote the kinds and levels of learning intended by the institution. The outcomes of such inquiries are applied to the design of curricula, the design and practice of pedagogy, and to the improvement of evaluation means and methodology.

{GUIDELINE: Periodic analysis of grades and evaluation procedures are conducted to assess the rigor and effectiveness of grading policies and practices.

4.8 Appropriate stakeholders, including alumni, employers, practitioners, and others defined by the institution, are regularly involved in the assessment of educational programs.

III. The Institutional Review Process

THE INSTITUTIONAL REVIEW PROCESS

This section of the *Handbook* is designed to give guidance to institutions and teams about the purposes, structure, and format of the institution's presentation for each stage of the review process. Further information and support is available on the Commission website (*www.wascsenior.org*), through workshops offered during the year, and at the annual WASC Academic Resource Conference.

Introduction

The heart of accreditation lies in the institutional self-review. To be done effectively and with integrity, the review requires the public commitment of the institution's leadership to openness, candor, and serious engagement, and an evident intention to use the results of the self-review to improve institutional capacity and educational effectiveness. The WASC accreditation process does not review all aspects of institutional functions in a compliance mode. Instead, it reviews and validates effective ongoing internal systems of quality review and improvement. External evaluation under this approach can only be successful when built on an effective internal institutional process of evaluation, reflection, recommendations, and plans for action.

Overview of the Accreditation Review Cycle

The accreditation review process consists of three stages: the Institutional Proposal, the Capacity and Preparatory Review (CPR), and the Educational Effectiveness Review (EER). This three-stage process applies to all institutions, regardless of where they are in the accreditation process. In the case of institutions being considered for candidacy or initial accreditation, and for institutions with a recent history of sanctions, the primary focus of the review is on institutional compliance with the Standards of Accreditation. Other institutions may choose to focus on selected themes and address the Standards in the context of those themes.

As described below, the Institutional Proposal is intended to define and organize how the institution will address Commission Standards through self-review. It focuses on several major issues that will improve institutional performance, especially with respect to educational effectiveness. The CPR and EER are intentionally designed to be aligned and sequential, to enable the institution to engage in a staged, developmental process that leads beyond minimum compliance to significant improvement of both institutional capacity and educational effectiveness. The maximum time period between Capacity and Preparatory Reviews is ten years, though the Commission often places institutions on shorter cycles of review.

In order to obtain accreditation or remain accredited, each institution is required to demonstrate, through the three-stage process, that it fulfills the two Core Commitments of the Accrediting Commission:

I. Commitment to Institutional Capacity: The institution functions with clear purposes, high levels of institutional integrity, fiscal stability, and appropriate organizational structures to fulfill its purposes.

II. Commitment to Educational Effectiveness: The institution evidences clear and appropriate educational objectives and design at the institutional and program level, and employs processes of review, including the collection and use of data, that assure delivery of programs and learner accomplishments at a level of performance appropriate for the degree or certificate awarded.

The role of WASC evaluation teams at each stage of the review process is to work with the institution's evidence and exhibits to determine if they accurately and fairly represent the institution within the context of Commission Standards, and to determine if the institution has effectively addressed the Core Commitments and will be able to sustain and improve its capacity and effectiveness for the period of accreditation granted by the Commission.

Outcomes of the Accreditation Review Process

The Commission has identified the following outcomes for the accreditation review process.

For the institution:

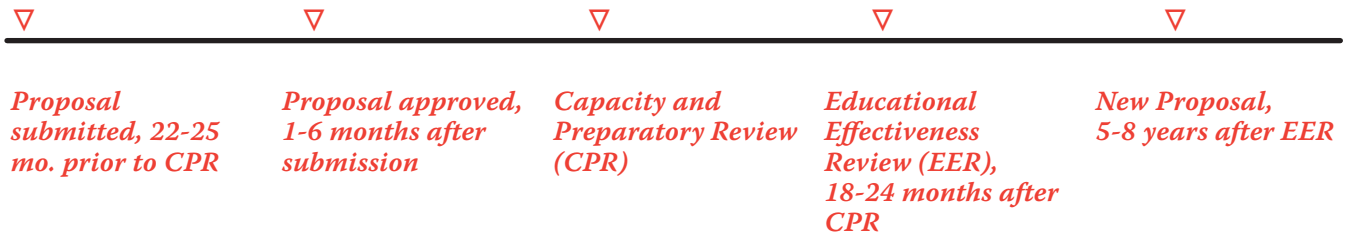
- The development and more effective use of indicators of institutional performance and educational effectiveness to support institutional planning and decision making;
- Greater clarity about the institution's educational objectives and criteria for defining and evaluating those objectives;
- Improvement of the institution's capacity for self-review and its systems of quality assurance, data collection and analysis;
- A deeper understanding of student learning, the development of more varied and effective methods of assessing learning, evaluation of whether levels of performance are appropriate to the degree and program, and the use of assessment results to improve program and institutional practices;
- Systematic engagement of the faculty on issues of assessing and improving teaching and learning processes within the institution and on aligning support systems for the faculty more effectively toward this end.

To fulfill the purposes of accreditation:

- Validation of the institution's presentation of evidence, both to assess compliance with accreditation Standards and to provide a basis for institutional improvement;
- Demonstration of the institution's fulfillment of the Core Commitments to Institutional Capacity and Educational Effectiveness.

Institutions that have successfully completed the three-stage process find that the process can lead to significant institutional engagement and improvement on important issues, especially assessment, student learning outcomes, and educational effectiveness.

WASC Institutional Review Cycle



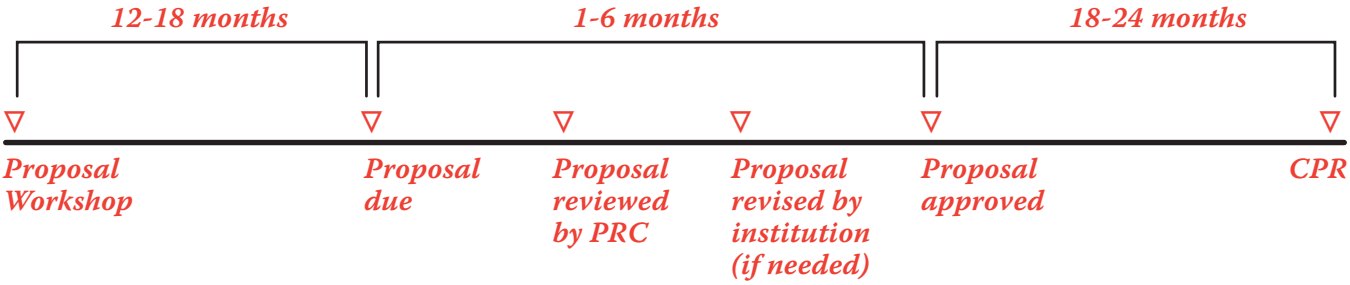
STAGE 1: THE INSTITUTIONAL PROPOSAL

Purposes: The Institutional Proposal is the first stage in the accreditation review cycle and guides the entire accreditation review process. It establishes a framework for connecting each institution's context and priorities with the Standards of Accreditation for the accreditation review. Once accepted, the proposal serves as the primary basis for both institutional self-review and team evaluation, and is given to each evaluation team and the Commission, along with the Accreditation Standards, as the basis upon which the evaluation of the institution should occur.

The proposal plays a key role in the accreditation process by calling upon the institution to:

1. Establish the context for its accreditation review;
2. Conduct a preliminary evaluation of itself under the Standards of Accreditation to identify areas in need of improvement;
3. Link its self-review under the Standards with defined outcomes for the accreditation review;
4. Identify the key issues of institutional capacity to be addressed in the Capacity and Preparatory Review;
5. Develop strategies for assessing and improving student and organizational learning in the Educational Effectiveness Review;
6. Identify for each of the stages of review such necessary components as researchable questions, key indicators of performance, evidence to be collected and used, committees or groups to be involved, and the resources needed as components of a work plan for the review;
7. Evaluate the effectiveness of its data gathering and analysis systems;
8. Develop a portfolio of data tables and institutional evidence that serves the institution throughout the review and beyond.

Timing: Proposals are submitted approximately two years prior to the CPR visit, on a date set by the Commission. This timing allows for review by the Proposal Review Committee and revision by the institution, if necessary. Institutional representatives are required to attend a Proposal Workshop in order to prepare the proposal under this timetable. The proposal should be approved by the Proposal Review Committee no later than eighteen months prior to the CPR visit.



Format and Required Elements: The proposal represents a plan of work that should be framed as a single, interconnected process. Considerable thought should be given to what the institution intends to accomplish through the entire review process and how different institutional constituencies will be engaged in developing and approving the proposal, and implementing it through the CPR and EER visits.

The proposal process is designed to enable institutions to adapt the accreditation review to their own context and accreditation history with WASC, and demonstrate how they meet the Core Commitments and Standards of Accreditation. The process also allows an institution to align activities undertaken for its accreditation review with its strategic plan and to focus on key areas of improvement. In the design of the proposal, institutions are encouraged to be creative, build on processes already in place, focus on a limited number of issues that can be addressed in depth, increase attention to student learning and success, and improve the analysis and use of evidence throughout the institution.

The Proposal Workshop provides opportunities for teams to learn the latest approaches to the review process, interact with other institutions, and build a foundation for the proposal. In addition, Commission staff has developed a set of materials to support the proposal process. These materials are occasionally updated or revised. Check the Commission website for the latest version of these materials.

The proposal should be organized into four (4) sections and is to include several specific elements, as defined below:

A. Setting the Institution's Context and Relating the Proposal to the Standards.

1. **Institutional Context Statement.** This key section of the proposal lays the foundation for why a particular set of issues and approaches is being proposed by the institution for its accreditation review. Drawing upon institutional data, especially that provided in the data tables on financial capacity, diversity, retention, and graduation rates, this section should briefly describe: i) the institution's background, ii) strengths and challenges, and iii) approaches used to identify and assess student learning outcomes across the institution. Two Commission documents, the *Inventory of Educational Effectiveness Indicators* and the *Inventory of Concurrent Accreditation*, are designed to be used developmentally across the CPR and the EER and must be included. In addition, the institution should identify how the proposal responds to issues raised by the most recent Commission action letter and, where relevant, issues identified by the Substantive Change or Interim Report Committees.

2. **Preliminary Self-Review Under the Standards of Accreditation**. Using the WASC *Worksheet for Preliminary Self-Review Under the Standards* and the *What Really Matters on Your Campus?* exercise, or through other means, the institution should identify key issues arising under the Standards. Particular attention should be paid to retention and graduation rates, student learning assessment results, and organizational learning/quality assurance systems that will be embedded within institutional practice beyond the accreditation review process. [The self-review worksheet may be submitted as an appendix and is optional.]

3. **Process for Proposal Development and Leadership Involvement**. In this section, the institution should describe how it developed the proposal and generated broad institutional support for it. Key institutional leaders, especially the chief executive officer, chief academic officer, and

faculty leadership, should be significantly involved in the design and implementation of the proposal and be demonstrably committed to its implementation and success.

B. **Framing the Review Process to Align the Capacity and Educational Effectiveness Reviews**. Institutions may wish to refer to the Commission support document *Expectations for Two Reviews* for assistance in developing this section. (See *www.wascsenior.org* for the latest version of this document, and other related materials.)

1. **Overview and Goals for the Accreditation Review Process**. The institution should describe in this overview section a coherent vision and specific outcomes for the entire accreditation review as a single connected process, specifying what it intends to accomplish and how the CPR and EER are connected and aligned to achieve these outcomes. As with all outcomes, these should be framed as results, not activities to be undertaken. These overarching outcomes should be supported by the outcomes identified for each stage of the review. Of particular interest is how the accrediting review process will improve student learning and success at the institution. In addition, the institution should consider the outcomes articulated for the accreditation review process in the Introduction to the *Handbook*.

2. **Approach to the Capacity and Preparatory Review**. This section should describe how the institution intends to address the Core Commitment to Institutional Capacity, by discussing three key foci:

    a. The institution's self-assessment of its capacity (resources, structures and processes), especially under Standards 1, 3 and 4. The institution should identify key issues and strategic themes that it intends to address in the CPR, and the intended outcomes for this review. For each issue and/or theme, the institution should identify what key indicators will be developed or relied on, who will be involved, and how specific activities will be organized to achieve the outcomes identified. This section should reference, where appropriate, the institution's self-review under the Standards and key Standards and Criteria for Review (CFRs) that will be emphasized in the CPR.

    b. The institution's infrastructure to support educational effectiveness, especially retention and graduation, the assessment of student learning, and program review under Standard 2, and its organizational learning and use of evidence under Standard 4.

    c. The institution's level of preparation for, and progress toward, the EER at the time of the CPR. The institution may wish to use the Commission document *Educational Effectiveness Framework* as a guide to evaluate its progress.

3. **Approach to the Educational Effectiveness Review**. This section should describe how the institution intends to address the Core Commitment to Educational Effectiveness by discussing:

    a. The institution's specific intended outcomes for this stage of review. As with the CPR, these outcomes may be related to key issues and/or strategic themes. For each issue/theme, the institution should indicate specific research questions, methods of inquiry, key indicators, and the specific groups that will be involved in the review process. Areas where institutional systems of quality assurance are to be reviewed and improved (e.g., program review processes, capstone courses, portfolio reviews) should also be identified and incorporated into the proposal. The institution should explain why it has proposed this particular approach to the EER. This rationale should flow from the institution's self-review under the Standards and analysis of the current state of its student learning outcomes assessment. This section should additionally reference, where appropriate, the institution's self-review under the Standards and key Standards and Criteria for Review (CFRs) that will be emphasized in the EER.

b. The institution's specific plans for how it will review and improve student and organizational learning across the institution. The institution should also identify how it will review and evaluate actual student work and learning.

C. Demonstrating a Feasible Plan of Work and Engagement of Key Constituencies.

1. **Workplan and Milestones.** Either in this section or as part of one of the sections above, the proposal should indicate for each stage how the work will be conducted, which organizational structures and processes will be used, and what key indicators are likely to be included in the Institutional Presentation. Milestones and a statement of what will be accomplished by the time of the CPR and the EER should be provided. It is expected that the workplan for the EER will be implemented simultaneously with the preparation for the CPR, rather than sequentially. This will allow for evidence, especially student learning results, student portfolios and other work, to be reviewed, analyzed, discussed, and acted upon by the institution.

2. **Effectiveness of Data Gathering and Analysis Systems.** This section should review the effectiveness of the institution's data gathering and analysis systems for both undergraduate and graduate programs, especially those systems related to the collection, dissemination and use of disaggregated retention and graduation data, student learning assessment results, licensure examination results, job placement rates, graduate school acceptance rates, and other key outcomes data. The institution should indicate how these data gathering and analysis systems will be used and, as necessary, improved to support internal institutional dialogue and a culture of evidence throughout the accreditation review and beyond.

3. **Commitment of Resources to Support the Accreditation Review.** This section should describe how the institution will organize, oversee, and support the review during its several stages. What human, technological and physical resources will be relied upon to support the accreditation review? What is the budget for the review? To what extent will the review be linked to ongoing institutional structures and priorities to increase value and reduce unnecessary work? What are the plans to sustain the institution's improvements beyond the review?

D. Presenting Appendices Related to the Proposal.

1. **Data Exhibits**. As an appendix to the proposal, the institution should submit the set of data exhibits and the *Summary Data Form* for the proposal, which are available on the Commission website (*www.wascsenior.org*). Data should be presented in the form of five-year historical trends. References to the institution's analysis of these data, especially the *Inventory of Educational Effectiveness Indicators* and other appendices, should be made throughout the proposal, as appropriate.

2. **Off-Campus and Distance Education Degree Programs.** Distance education and off-campus programs must be evaluated as part of the review. The institution should provide a list of all degree programs where 50 percent or more of the program is offered off-site or by distance learning, and a description of how the evaluation of these programs will be incorporated into the review process. The proposal should explain how these programs will be included in the institution's self-review.

3. **Institutional Stipulations.** An Institutional Stipulation Statement should be submitted, signed by the Chief Executive Officer, that establishes:

   a. That the institution will use the review process to demonstrate its fulfillment of the two Core Commitments, that it will engage in the process with seriousness and candor, that accurate data will be presented, and that the Institutional Presentation will fairly present the institution.

   b. That the institution has published and publicly available policies as identified by the

Commission (see Appendix 1). Such policies will be available for review on request throughout the period of accreditation.

c. That the institution will abide by procedures adopted by the Commission to meet United States Department of Education (USDE) procedural requirements. (See "Federally Mandated Policies" on the Commission website.)

d. That the institution will submit, in a timely fashion, all regularly required data and any additional data specifically requested by the Commission during the period of accreditation or candidacy.

e. That the institution has reviewed its off-campus programs and distance education programs to ensure that they have been approved as required by WASC Substantive Change policies.

Length of Proposal: Exclusive of data exhibits and stipulations, the Institutional Proposal should not exceed fifteen (15) pages in length.

Proposal Review Process: Following submission, the Institutional Proposal is reviewed by a panel of the Proposal Review Committee (PRC), a peer review committee comprised of institutional and Commission representatives. The PRC is authorized to accept proposals that it believes will result in a review that will effectively demonstrate that an institution fulfills the two Core Commitments of accreditation. In cases where the PRC is not assured that the proposal will result in such a review, the Committee may request further information from the institution and/or may require revision and re-submission of the proposal. At the conclusion of the PRC review, Commission staff will inform the institution of the action of the panel. Once approved, the final version of the proposal is distributed to evaluation teams and the Commission. The current fees for the first and any subsequent proposal submissions are found on the Commission website.

Changes After Acceptance: Once accepted, the proposal may be further refined or modified during the accreditation review by mutual consent, or by the Commission. Such modification can occur, for example, once the institution has begun implementation of the proposal, or upon the recommendation of the evaluation team following the CPR.

STAGE 2: THE CAPACITY AND PREPARATORY REVIEW

Purposes: The Capacity and Preparatory Review is designed to enable the Commission to determine whether an institution fulfills the Core Commitment to Institutional Capacity: "The institution functions with clear purposes, high levels of institutional integrity, fiscal stability, and organizational structures and processes to fulfill its purposes." In keeping with the goals of the accreditation process, the Capacity and Preparatory Review is intended to be a focused review which includes a site visit with clearly defined purposes and procedures. The purposes of the CPR are to:

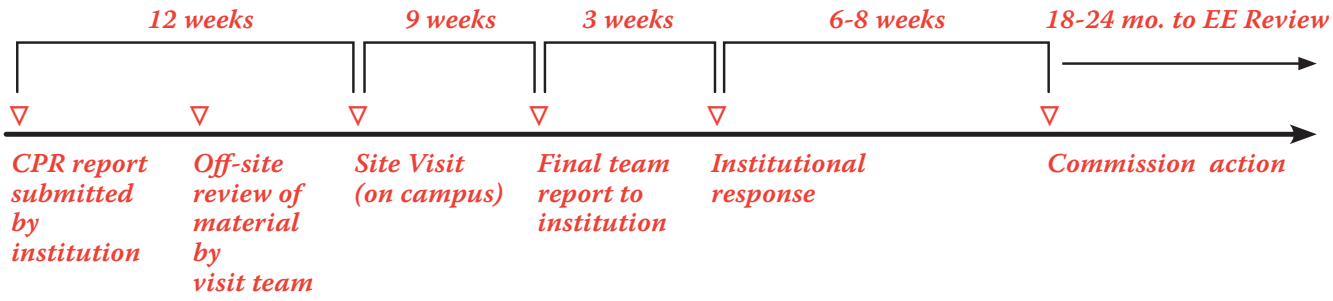
1. Review and verify the information provided in the Institutional Presentation (CPR report and data portfolio), and assure that the institution's data fairly and accurately portray the state of the institution at the time of review.

2. Evaluate key institutional resources, structures, and processes in light of the Commission's Standards, to assure that the institution operates at or above threshold levels acceptable for accreditation (or candidacy) and, where appropriate, to identify any capacity-related issues that need to be reconsidered during the Educational Effectiveness Review.

3. Evaluate the institution's infrastructure to support educational effectiveness, especially in regard to retention and graduation, the assessment of student learning, and program review under Standard 2, and organizational learning and use of evidence under Standard 4.

4. Assess the institution's preparedness to undertake the Educational Effectiveness Review as identified in the proposal, and assist the institution in refining its focus and plan for that review.

Timing: The Capacity and Preparatory Review occurs on dates established by the Commission.



Who Is Involved in Preparation: Key institutional constituencies, including faculty leadership, should be involved in the design of the CPR report and the data portfolio, the selection of indicators, and the drafting and review of the analytical essays. The evidentiary portion of the CPR report is designed to be prepared largely from existing evidence. The entire presentation should be reviewed by various constituencies of the institution, including faculty and staff leadership and governing bodies.

The Capacity and Preparatory Review Report and Data Portfolio: To support the Capacity and Preparatory Review, each institution is responsible for developing a Capacity and Preparatory Review report. The report is intended to be evidence-based, balanced, candid in presenting strengths and areas in need of improvement, and be supported by a set of exhibits (the data portfolio) that support the institution's claim that it meets the Core Commitment to Institutional Capacity.

All Capacity and Preparatory Review reports should include the following elements:

1. **An Introduction** that describes the contents of the CPR report and data portfolio as a whole, together with any changes in context that may have arisen since WASC's approval of the proposal.

2. **Reflective Essays** that use one of the two approaches below (Comprehensive or Thematic). These essays should analyze key areas of capacity, discuss the implications of the data portfolio with specific reference to key documents (see 6 b., below), and identify recommendations for improvement.

3. **An Update** on the progress being made in addressing the issues identified in the proposal for the Educational Effectiveness Review.

4. **A Concluding or Integrative Essay** that summarizes the institution's major findings, provides a reflective view of its strengths and weaknesses in relation to the Commission's Standards and/or the themes selected by the institution, and proposes appropriate recommendations and follow-up steps. A timeline for follow up should also be included.

5. **An Appendix** that documents the institution's response to concerns that were identified by the Commission in its last action letter and the major recommendations of the last visiting team.

6. **An Analytical Data Portfolio**, which includes:

    a. Updated versions of data exhibits, including the *Summary Data Form*, the *Inventory of Educational Effectiveness Indicators*, and the *Inventory of Concurrent Accreditation* that were originally submitted with the proposal.

    b. A set of prescribed exhibits and data displays, including lists of institutional policies

required by the Commission [stipulated by the CEO and subject to audit on site (see Appendix 1)], together with more detailed breakdowns of:

i. student body characteristics;

ii. enrollments and degrees granted for the institution's academic programs;

iii. graduation and retention rates (disaggregated by student type and, if possible, by program or major);

iv. more detailed data on faculty and staff, and on fiscal, physical, and information resources;

v. a table listing current assessment activities;

vi. a set of standard statistics on educational operations.

c. Institutions whose default rate for Title IV programs requires a default reduction plan should also provide a copy of their plan for review.

7. A set of exhibits chosen by the institution as evidence of its commitment to capacity. These exhibits may include examples of policies and procedures, additional data, or examples of how particular activities are undertaken, as suggested by particular Commission Standards or Criteria for Review. Institutions with off-campus and distance education programs should include relevant data and analyses about these offerings.

To the extent possible, the exhibits included in the data portfolio should be drawn from existing documents and data rather than being prepared especially for the review team. The portfolio is also intended to be maintained, updated, and used in succeeding reviews to avoid duplication of effort and additional institutional costs. To the extent possible, it is hoped the data portfolio will also be useful to the institution beyond the review cycle.

The Capacity and Preparatory report should reflect the following important principles that are relevant to all four Standards. These include:

- Establishment of clear outcomes;
- Reliance on indicators and metrics of achievement, and/or specific bodies of evidence that can help the institution to determine the degree to which outcomes are being achieved; and
- A commitment to take action on the basis of evidence in order to improve performance.

These three principles should guide an institution's self-review, selection of exhibits for the data portfolio, and the content of Reflective Essays.

Two Approaches to the Capacity and Preparatory Report Essays: Most institutions have chosen one of two basic approaches to the Capacity and Preparatory Review and report. Institutions are encouraged to develop an approach that fits their needs and context.

1. **Comprehensive/Standards-Based.** The Comprehensive approach to the CPR follows the Standards and Criteria for Review (especially those that fall under Standards 1, 3, and 4) to document the institution's assessment of its capacity with regard to resources, structures, systems, and processes. In reflective essays, the institution should analyze the data exhibits in its portfolio through the context of the Commission Standards. In addition, the institution should also address its capacity and infrastructure to support student and organizational learning under Standards 2 and 4, including its approach to student learning outcomes assessment and program review. Many institutions have found the Comprehensive approach to be a valuable means of organizing the review, giving emphasis to specific CFRs that correspond to areas in which the institution wishes to improve.

Eligible and candidate institutions are required to use the Comprehensive approach. Institutions on sanction must also use this approach, focusing on the Standards and Criteria for Review that the Commission and the evaluation team identified as the basis for sanction.

2. **Thematic.** The Thematic approach focuses the CPR report primarily on themes that the institution selects to facilitate improvement and wide engagement in the review process. Institutions should analyze the data portfolio exhibits in reflective essays based on the selected themes. Themes may be developed to improve institutional capacity in such areas as enrollment management, governance, strategic planning, or other areas that relate most directly to issues arising under Standards 1, 3 and 4. Institutions for which capacity concerns have not been cited may select one set of themes for both reviews, with the CPR report focusing on the capacity and infrastructure elements and the Educational Effectiveness Review focusing on evidence of results -- how well the capacity and infrastructure function to improve the institution. Examples of such themes include revising and implementing program review to focus on student learning outcomes, assessing and improving writing and critical thinking, improving institutional research capacity and function, and building comprehensive enrollment or student success systems.

   The Thematic approach to the CPR is typically used by institutions with 10-year accreditation terms, no major issues cited in the previous review, and for whom focused attention on several select issues across both reviews will yield the most value and impact.

Regardless of approach, the institution is expected to include in its CPR report a study and analysis of student success, drawing from, but not limited to, its data on retention and graduation rates, disaggregated by student type and by program. To the extent possible, the study should include comparisons with similar institutions and, where appropriate, recommendations for improvement.

In selecting an approach, an institution should undertake a self-assessment in consultation with WASC staff. If selecting the Thematic approach, staff will assist the institution in determining the emphasis/proportion of each capacity element in the institutional report. The Proposal Review Committee (PRC) may also help guide the institution by identifying issues or topics for emphasis.

Report Length: The entire Capacity and Preparatory Review report is limited to thirty-five (35) pages of text, exclusive of data exhibits and appendices.

Process of the Capacity and Preparatory Review: To verify the evidence included in the Capacity and Preparatory Review report, a site visit with the following characteristics will be conducted:

1. **Team Size.** CPR teams normally range from four to six people, depending on the size and complexity of the institution and the scope of the issues involved.

2. **Visit Length.** CPRs normally involve two or three days on campus.

3. **Process of Review.** The CPR team's responsibility is to assure that the four goals of the CPR, identified above, are met. The team typically organizes its visit around the format adopted by the institution's CPR report, using the Standards of Accreditation as a framework. The team may also address other issues that it identifies in its pre-visit activities, or on site.

4. **Pre-Visit Activities.** The CPR team reviews the institution's CPR report and data portfolio in a team conference call prior to the site visit and communicates with the institution to clarify any ambiguities, to request additional evidence, and to submit specific questions that it wishes to explore more fully in the course of the visit. Also prior to the visit, the institution is expected to circulate an email to all faculty, students and staff, inviting them to submit comments about the institution to a secure email account set up by WASC for the visit.

5. **Team Report.** The CPR team prepares a report of its review, describing and analyzing institutional compliance with the Accreditation Standards, especially in relation to the Core

Commitment to Institutional Capacity as embodied in the Standards. The team also addresses the institution's preparedness to engage in developmental analysis of its educational effectiveness and recommends ways to improve the focus and presentation of issues in the Educational Effectiveness Review. The team report is submitted to the institution for correction of errors of fact before the report is finalized and sent to the Commission. The institution also has the opportunity to prepare a formal written statement to the Commission in response to the final report.

Commission Action: Following submission of the team report, the Commission will take action. The full range and definition of Commission decisions are found in Section IV of the *Handbook*. Typically, the Commission will act as follows:

1. Receive the report of the CPR team, find that the institution fulfills the Commission's expectations under the Core Commitment to Institutional Capacity, and proceed with the scheduled Educational Effectiveness Review. Accreditation (or candidacy) continues.

2. Identify any additional issues to be addressed in the Educational Effectiveness Review, adjusting the date of the EER, if needed, to allow the institution more time to address identified issues and prepare more effectively for the Educational Effectiveness Review.

3. Request an interim report or special visit, or impose a sanction, if warranted.

STAGE 3: THE EDUCATIONAL EFFECTIVENESS REVIEW

Purposes: The Educational Effectiveness Review is intended to be aligned with the Capacity and Preparatory Review. Its primary purpose is to invite sustained engagement by the institution on the extent to which it fulfills its educational objectives. Through a process of inquiry and engagement, the Educational Effectiveness Review also is designed to enable the Commission to make a judgment about the extent to which the institution fulfills its Core Commitment to Educational Effectiveness.

Specific purposes of the Educational Effectiveness Review include:

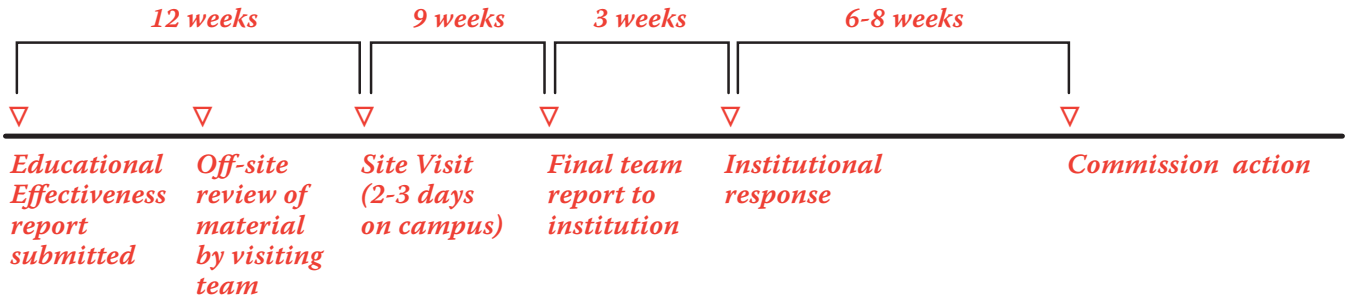
1. To review institutional efforts to evaluate the effectiveness of educational programs, with special attention to the institution's program review process;

2. To examine institutional practices for evaluating student learning and to develop and share good practices for using educational results to improve the process of teaching and learning;

3. To examine the alignment of institutional resources with activities designed to achieve the institution's educational objectives;

4. To promote sustained engagement with selected issues of educational effectiveness consistent with Commission Standards. These issues will have already been identified by the institution and approved through the proposal review process. The institution is encouraged to select issues of importance to itself in this process, so that the review will be of maximum value to the institution.

Timing: As developed and approved through the proposal review process, the Educational Effectiveness Review will normally take place one and a half to two years following the Capacity and Preparatory Review.



Who Is Involved in Preparation: Because the primary emphasis in this review is placed on inquiry and engagement related to teaching and learning, the faculty should be deeply involved in the design and implementation of the Educational Effectiveness report and review process, along with others at the institution who are involved in matters related to educational effectiveness.

The Educational Effectiveness Report: To support the Educational Effectiveness Review, each institution is responsible for developing an Educational Effectiveness Review report. In this report, institutions are expected to explore topics or themes that are related to the institution's own priorities and needs, with special emphasis on the assessment and improvement of student learning and the development of a culture of organizational learning and improvement. The Commission Standards, especially Standards 2 and 4, serve as a frame for selecting topics to be examined in the course of the Educational Effectiveness Review report. The Commission has developed an *Educational Effectiveness Framework* and other documents to assist institutions and teams in assessing educational effectiveness under Standards 2 and 4. In developing their Educational Effectiveness reports, institutions should draw upon, or combine the best elements of, the two approaches described below. Alternative approaches should be discussed with WASC staff.

1. **Comprehensive/Standards-Based**. Organized primarily around Standards 2 and 4, the institution produces a single comprehensive document describing how it investigates and assures educational quality. This report may include a comprehensive review of assessment at the institution, a comprehensive examination of how the institution can become more learning-centered, or an extensive review of the entire institution, using specific points of inquiry. Through any of these approaches, the institution is expected to include evidence-based discussions of student learning.

2. **Thematic**. In addition to the required elements specified below, the institution carefully selects a limited number of topics for review in depth, identifies expected areas of inquiry or researchable questions for each topic, selects a methodology for engaging each topic, and carries out each investigation as a rigorous research-based study. Typically, three or four topics are selected, involving aspects of educational effectiveness. Student learning should be addressed in at least one of the selected themes, and the analysis of each theme should be grounded in, and supported by, concrete data.

Regardless of the approach taken, all Educational Effectiveness Review reports are expected to include the following elements:

1. **A Description of the Educational Effectiveness Review Approach.** Institutions should provide background descriptions and analyses of how they approach educational effectiveness through their own intentional and comprehensive system of quality assurance and improvement. This part of the report is intended to provide the team and Commission with the basic context for examining educational effectiveness at the institution. This section should also serve the institution by providing an opportunity to inventory the scope and effectiveness of the institution's processes for maintaining and improving educational quality. The institution should broadly describe a) the design and approaches it takes to assure quality in teaching and learning; b) the kinds of evidence of learning it collects; and c) the way in which evidence is used to

support further inquiry and improvement.

2. **Significant Engagement and Analysis of Educational Effectiveness.** As part of the Educational Effectiveness Review, each institution is expected to engage the issue of educational effectiveness in depth. The institution is expected to move well beyond description of activities to provide analysis of the evidence in its data portfolio, reflections on how well the institution's quality assurance processes are working, and ways that those processes have led to further improvement. In addition, the Educational Effectiveness Review should provide an occasion for engagement of the institution's constituencies, especially its faculty, to further its understanding of the results of its educational effectiveness inquiry and to lead to specific recommendations for improvement. The Educational Effectiveness Review is also an opportunity to connect the efforts of co-curricular programs with institutional and program learning outcomes. The institution is expected to work with evidence of educational results and student learning as a major part of the Educational Effectiveness Review report.

3. **An Analysis of the Effectiveness of the Program Review Process.** Institutions are expected to analyze the effectiveness of the program review process, including its emphasis on the achievement of the program's learning outcomes. The process should be sufficiently embedded for the institution and the team to sample current program review reports (self-studies and external review reports) in order to assess the impact of the program review process and its alignment with the institution's quality improvement efforts and academic planning and budgeting.

4. **Further Development of Student Success Efforts.** Based on the findings of the institution and the team at the CPR, the institution will be expected to further its analysis of student success, deepening its analysis of its own and comparative data of graduation and retention rates, year to year attrition, campus climate surveys, etc.

5. **An Updated Data Portfolio.** Building on the data portfolio that was developed for the Capacity and Preparatory Review, the institution should present additional evidence and exhibits that support its analysis of educational effectiveness and student learning. The institution should provide an updated version of the *Summary Data Form*, *Inventory of Educational Effectiveness Indicators*, and the *Inventory of Concurrent Accreditation*, and a list of current assessment activities, such as that submitted as part of the CPR. In addition, the institution might include selected results of assessment studies, results of any summative learning measures that are deemed important by the institution (e.g., pass rates for licensure examinations, capstone courses, etc.), surveys of graduates and current students, and employer feedback on former student performance. Institutions should analyze the data and expectations for improvement, including milestone targets for specific groups of learners.

6. **An Integrative Component.** All Educational Effectiveness reports are expected to include an integrative component in which the institution synthesizes and integrates the discrete elements of its Educational Effectiveness Review and the impact of the entire sequential accreditation review process. For most institutions, this takes the form of an integrative chapter. Institutions may choose to provide integrative comments and reflections throughout their presentation. Whichever model is used, the institution should move beyond the separate topics for review, and ask, "Were there common themes or issues that emerged? What was learned from the internal review process and what major recommendations emerged? Were the goals and outcomes established in the proposal achieved? What will be the next steps taken to address the major recommendations of the internal review process? How will momentum be sustained?" The institution is also expected to include its plan, methods, and schedule for assessing learning outcomes beyond the Educational Effectiveness Review and for embedding assessment into regular institutional functioning.

7. **Response to the Capacity and Preparatory Review Recommendations**. Institutions are

expected to respond to the recommendations in the CPR team report and the related Commission action letter, and describe and evaluate their progress in addressing these recommendations. This response may be embedded in the report or included in an appendix to the report.

Report Length: The entire Educational Effectiveness report is limited to fifty (50) pages of text, exclusive of the data portfolio and appendices.

Process of the Educational Effectiveness Review: To verify the evidence included in the Educational Effectiveness Review report, a site visit will be conducted with the following characteristics:

1. **Team Size.** The EER team will normally range from four to seven people, depending on the nature of the institution and the scope of issues.

2. **Visit Length.** The Educational Effectiveness Review will normally involve two or three days on campus.

3. **Process of Review.** The EER team will be selected to ensure expertise in the themes of the review and in topics related to educational effectiveness. Teams will use a combination of methods to gather evidence while on campus, such as sampling core quality assurance processes and student learning assessment methods, conducting structured interviews, and reviewing documentary evidence. Teams may also conduct selected on-site audits to validate the procedures used by the institution in its own self-investigation and/or to verify the accuracy of data included in the institution's report.

4. **Pre-Visit Activity.** As in the CPR, the EER team may also communicate with the institution in advance of the visit to clarify any ambiguities in the Educational Effectiveness Review report, to request additional evidence, and/or to submit specific questions that it wishes to explore more fully in the course of the visit. Also prior to the visit, the institution is expected to circulate an email to all faculty, students and staff, inviting them to submit comments about the institution to a secure email account set up by WASC for the visit.

5. **Team Report.** The EER team prepares a report of its review, describing and analyzing the institution's status with respect to the Core Commitment to Educational Effectiveness. In doing so, the team uses the institution's presentation and supporting evidence, along with the on-site review, to evaluate the institution's ability to sustain an evidence-based inquiry into educational effectiveness that leads to institutional improvement. Where applicable, the team addresses themes selected by the institution, recommendations for improvement, and issues identified by the Commission after the CPR for consideration at the Educational Effectiveness Review. The team report is submitted to the institution for correction of errors of fact before the report is finalized and sent to the Commission. The institution is also provided opportunity to prepare a formal written statement to the Commission in response to the final report.

Commission Action: Following submission of the Educational Effectiveness Review team report, the Commission will take action. The full range and definition of Commission decisions are described in Section VI of the *Handbook.* Typically, the Commission will act as follows:

1. Receive the report of the EER team and determine that the institution has satisfactorily addressed the Core Commitments as embodied in the Commission Standards. The Commission reviews the reports of both the Capacity and Preparatory and the Educational Effectiveness Reviews to make this determination. With positive results from both reviews, the Commission will reaffirm accreditation for a period of up to ten years.

2. Reaffirm accreditation with monitoring conditions, such as special visits or interim reports.

3. Impose a sanction, if warranted.

4. Schedule follow-up activities as needed.

Fees and Charges

Institutions granted candidacy or accreditation are responsible for paying annual dues to maintain this status, or arranging an acceptable payment plan, upon billing by the Commission and no later than September 30th of each year. If an institution fails to pay all required dues by this date, its candidacy or accredited status will automatically expire. Annual fees are based on institutional enrollment.

In addition, fees and expenses are charged for the following activities:

Eligibility Applications: Fees are charged for the initial application, reapplications, and for appeal of eligibility determinations. (Information for institutions seeking eligibility can be found in the publication, *How To Become Accredited*, on the Commission website.)

Candidacy and Initial Accreditation Applications: Once an institution has been determined to be Eligible, it is required to submit a one-time fee, which covers staff support for the candidacy and initial accreditation reviews. Additional fees are charged for visits and other services, as indicated on the Commission website.

Evaluation Visits: A visit fee is charged for each visit to an institution. The institution is also billed for the expenses of the visiting team and staff, including the cost of the chair's appearance before the Commission.

Special Charges: Additional charges are assessed for unusually complex evaluations that require staff time beyond that normally expended. These charges may include visits to off-campus and out-of-region programs and to institutions requiring unusually large teams in relation to the size of the institution.

Substantive Change: Fees are charged for substantive change applications and visits.

Commission Review of a Negative Action: When an institution requests a Commission Review, a special processing fee is charged and a deposit against costs is required. If the actual costs are less than paid, the excess is refunded. If actual costs are greater, the institution is billed for the difference.

Legal Fees: In the event that WASC receives subpoenas related to litigation between its accredited institutions and/or third parties, the institution involved in the litigation will be responsible for reimbursing WASC for all costs associated with responding to the subpoena. (See the Commission policy on *Legal Fees* for more details.)

All fees and charges are due and payable upon submission (of applications) or upon receipt of a bill from the Commission office.

A fee schedule for the Accrediting Commission for Senior Colleges and Universities is prepared each year and is available on the Commission website (*www.wascsenior.org*).

IV. Commission Decisions on Institutions

COMMISSION DECISIONS ON INSTITUTIONS

The Commission shall base its decisions on its evaluation of the evidence before it. In rendering a decision, the Commission shall have available all information related to the accreditation history of the institution, the visiting team's report, the response, if any, of the institution to the team report, and any comments made by the institution's representatives to the Commission subsequent to the team report. Unless good cause is demonstrated, the Commission will not consider evidence related to events and circumstances which postdate the visit by the team or information which was not available to the team.

Once the Commission has made a decision regarding the candidacy or accreditation of an institution, it will notify the institution in writing as promptly as possible. The forms of possible Commission action with regard to institutions are:

1. Grant Candidacy or Initial Accreditation
2. Deny Candidacy or Initial Accreditation
3. Defer Action
4. Continue Accreditation between the Capacity and Preparatory Review and the Educational Effectiveness Review
5. Reaffirm Accreditation
6. Issue a Formal Notice of Concern
7. Issue a Warning
8. Impose Probation
9. Issue an Order to Show Cause
10. Terminate Accreditation

All of the above Commission actions, except the formal Notice of Concern, are made public. A report of Commission actions is published and distributed following Commission meetings, and each individual institution's status is noted on the Commission website, in the *Member Directory*. In taking an action, the Commission also may impose conditions or request additional reporting or site visits.

DECISION	PUBLIC/PRIVATE	MAXIMUM TERM
Grant Candidacy	Public	Up to 4 years
Grant Initial Accreditation	Public	Up to 7 years
Defer Action	Public	1 year
Deny Candidacy or Initial Accreditation	Public	Minimum of one year before reapplying
Reaffirm Accreditation	Public	Up to 10 years
Issue a Formal Notice of Concern	Private	Up to 4 years

Issue a Warning	Public	2 years
Impose Probation	Public	2 years
Issue Show Cause Order	Public	1 year
Terminate Accreditation	Public	Effective on date specified, unless stayed by a request for Review or Appeal

1. Grant Candidacy or Initial Accreditation

Candidacy: The institution must demonstrate that it meets all, or nearly all, of the Standards of Accreditation at a minimum level and has a clear plan in place to meet the Standards at a substantial level of compliance for accreditation. Candidacy is limited to four years and is granted only when an institution can demonstrate that it is likely to become accredited during the four-year period.

Initial Accreditation: The institution has met Commission Standards at a substantial level and is ready to move into the accreditation cycle of review. Initial accreditation is for a period of up to seven years before the next comprehensive review.

2. Deny Candidacy or Initial Accreditation

Denial of candidacy or initial accreditation reflects the Commission's finding that an institution has failed to demonstrate that it meets all, or nearly all, of the Standards of Accreditation at the required minimum level for candidacy or initial accreditation. In its decision to deny candidacy or initial accreditation, Commission policy provides that an institution may reapply once it has demonstrated that it has addressed the issues leading to the denial. In all cases, it must wait at least one year before reapplying. (See the policy on *Reapplication after Denial of Candidacy or Initial Accreditation*.) Denial is an appealable action, as explained below.

3. Defer Action

Deferral is not a final decision. It is interlocutory in nature and designed to provide time for the institution to correct certain deficiencies. This action allows the Commission to indicate to an institution the need for additional information or progress in one or more specified areas before a positive decision can be made. Deferrals are granted for a maximum period of one year.

4. Continue Accreditation Between the Capacity and Preparatory Review and the Educational Effectiveness Review

This action is taken after the Commission has received the report from the Capacity and Preparatory Review team, has identified issues to be considered as part of the next review, and has confirmed that the institution is ready to proceed to the Educational Effectiveness Review. If necessary, the Commission may identify additional follow-up steps, such as an interim report or special visit, or may issue a formal Notice of Concern or sanction following the Capacity and Preparatory Review.

5. Reaffirm Accreditation

Reaffirmation of accreditation occurs at the completion of the comprehensive review cycle (following the EER) or when an institution is taken off of a sanction. It indicates that the Commission has found that an institution has met or exceeded the expectations of the Standards and the Core Commitments to Institutional Capacity and Educational Effectiveness. Reaffirmation is granted for up to ten years and may be accompanied by a request for interim reports and/or special visits, or a formal Notice of Concern.

6. Issue a Formal Notice of Concern

This action provides notice to an institution that, while it currently meets WASC Standards, it is in danger of being found out of compliance with one or more Standards if current trends continue. A formal Notice of Concern may also be issued when an institution is removed from a sanction and the Commission wishes to emphasize the need for continuing progress and monitoring. Institutions issued a formal Notice of Concern have a special visit within four years to assess progress. If the Commission's concerns are not addressed by the time of the visit, a sanction is imposed, as described below.

A formal Notice of Concern is not made public by the Commission, which means that it is neither published in the *Directory* nor communicated when members of the public contact WASC for information on the accreditation status of the institution.

Commission Sanctions

Under United States Department of Education regulations, when the Commission finds that an institution fails to meet one or more of the Standards of Accreditation, it is required to notify the institution of these findings and give the institution up to two years from the date of this action to correct the situation. If an institution has not remedied the deficiencies at the conclusion of the two-year sanction period, the Commission is required, under US Department of Education regulations, to take an "adverse action," defined in the law as the termination of accreditation. Thus, all institutions must address the areas cited by the Commission expeditiously, with seriousness and the full attention of the institution's leadership. It is the responsibility of the Commission to determine, at the end of the sanction period, whether the institution has corrected the situation(s) and has come into compliance with Commission Standards.

The Commission has adopted three sanctions — Warning, Probation and Show Cause — to inform the institution and the public of the severity of its concerns about an institution's failure to meet one or more Commission Standards. Sanctions are not intended to be applied sequentially. Whichever sanction is imposed, the Commission is required by federal law to terminate accreditation, rather than to continue the institution under the same or a new sanction for another two-year period, unless clear progress has been made within two years.

All sanctions are made public and are published on WASC's website. Because all sanctions trigger the federal two-year limit, public notice is warranted regardless of the type of sanction. When the Commission issues a sanction or a negative action, a public statement is prepared in consultation with the institution for response to inquiries to WASC. The Commission reserves the right to make the final determination of the nature and content of the public statement. The institution is also expected to notify its constituents about the Commission action, in accordance with the WASC policy on *Disclosure of Commission Actions* (see the Commission website).

In addition, when an institution is placed on a sanction, the Commission typically requests that a meeting be held between WASC staff, the institution's chief executive officer, representatives of the institutional governing board and senior faculty leadership within 90 days following the imposition of the sanction. The purposes of the meeting are to communicate the reasons for the Commission action, to learn of the institution's plan to notify the institutional community about the action, and to discuss the institution's plan for addressing the issues that gave rise to the sanction. In imposing a sanction, the Commission also may require that the institution undergo a Compliance Audit at the next review, as per the policy on *Compliance Audits* (see the Commission website).

Federal law permits an extension of the two-year time frame when "good cause" is found. The Commission has determined that it will grant an extension for good cause only under exceptional circumstances and only when the following criteria are met:

a. The institution must have demonstrated significant accomplishments in addressing the areas of non-compliance during the period under sanction, AND

b. The institution must have demonstrated at least partial compliance with the Standard(s) cited, and, for any remaining deficiencies, demonstrate an understanding of those deficiencies, and readiness, institutional capacity, and a plan to remedy those deficiencies within the period of extension granted by the Commission.

In determining whether these criteria have been met, the Commission will also consider whether:

a. The quality of education provided by the institution is judged to be in substantial compliance with Commission Standards at the time of the extension, AND

b. The Commission has no evidence of any new or continuing violations of Standard 1 regarding institutional integrity, AND

c. The Commission has no evidence of other reasons or current circumstances why the institution should not be continued for "good cause."

The Commission may extend accreditation for "good cause" for a maximum of two years, depending on the seriousness of the issues involved and on its judgment of how much additional time is appropriate. By the conclusion of the extension period identified by the Commission, the institution must prepare a report that details its progress on the cited deficiencies and its compliance with those Standards cited by the Commission. Demonstrated compliance with Commission Standards is required and must be supported by verifiable evidence. Progress or promises of future action after such an extension are not sufficient.

7. Issue a Warning

A Warning reflects the Commission's finding that an institution fails to meet one or more of the Standards of Accreditation. While on Warning, any new site or degree program initiated by the institution is regarded as a substantive change (see the *Substantive Change Manual* for details). The candidate or accredited status of the institution continues during the Warning period. The Commission action to issue a Warning is subject to Commission Review, described below.

8. Impose Probation

Probation reflects the Commission's finding that the institution has serious issues of noncompliance with one or more of the Standards of Accreditation. While on Probation, the institution is subject to special scrutiny by the Commission, which may include a requirement to submit periodic prescribed reports and to receive special visits by representatives of the Commission. In addition, while on Probation, any new site or degree program initiated by the institution is regarded as a substantive change (see the *Substantive Change Manual* for details). The candidate or accredited status of the institution continues during the Probation period. The Commission action to impose Probation is subject to Commission Review, described below.

9. Issue an Order to Show Cause

An Order to Show Cause is a decision by the Commission to terminate the accreditation of the institution within a maximum period of one year from the date of the Order, unless the institution can show cause why such action should not be taken. Such an Order may be issued when an institution is found to be in substantial noncompliance with one or more Commission Standards or, having been placed on Warning or Probation for

at least one year, has not been found to have made sufficient progress to come into compliance with the Standards. An Order to Show Cause may also be issued as a summary sanction for unethical institutional behavior (see "Summary Sanctions for Unethical Institutional Behavior," below). In response to the Order, the institution has the burden of proving why its candidacy or accreditation should not be terminated. The institution must demonstrate that it has responded satisfactorily to Commission concerns, has come into compliance with all Commission Standards, and will likely be able to sustain compliance.

The candidate or accredited status of the institution continues during the Show Cause period, but during this period, any new site or degree program initiated by the institution is regarded as a substantive change and requires prior approval. (See the *Substantive Change Manual* for details.) In addition, the institution may be subject to special scrutiny by the Commission, which may include special conditions and the requirement to submit prescribed reports or receive special visits by representatives of the Commission.

The Order to Show Cause is sent to the chief executive officer and the chair of the governing board. The Commission action to issue an Order to Show Cause is subject to Commission Review, described below.

10. Terminate Accreditation

A decision to terminate accreditation is made by the Commission when an institution has been found to be seriously out of compliance with one or more Standards. Although not required, a decision to terminate may be made after an Order to Show Cause or another sanction has been imposed and the institution has failed to come into compliance. When accreditation is terminated, a specific date of implementation is specified. An action to terminate accreditation is subject to both the Commission review procedures and the WASC appeals process. If an institution closes after a termination action, the institution must comply with federal requirements and WASC policies about teach-out arrangements. WASC has established polices on notice of such actions (policy on *Disclosure of Commission Actions*) and on teach-out agreements. See the Commission website for the most current version of these policies.

Summary Sanctions for Unethical Institutional Behavior

If it appears to the Commission or its staff that an institution is seriously out of compliance with Standard One (Institutional Purposes and Integrity) in a manner that requires immediate attention, an investigation will be made and the institution will be offered an opportunity to respond on the matter. If the Commission concludes that the institution has so acted it may:

1. Sever relations if the institution has applied, but has not yet been granted candidacy or accreditation; or
2. If the institution is a candidate or accredited, either:
    a. issue an Order to Show Cause why its candidacy or accreditation should not be terminated at the end of a stated period;
    b. in an extreme case, sever its relationship with the institution by denying or terminating candidacy or accreditation; or
3. Apply less severe sanctions as deemed appropriate.

Commission Review Process

Institutions that are placed on Warning, Probation or Show Cause, or for which applications for candidacy or accreditation are denied, or for which candidacy or accreditation is terminated by the Commission, may request a review of this decision according to the following procedures. These review procedures are designed as a continuation of the accreditation peer review process and are therefore considered to be non-adversarial.

1. When the Commission takes any of the actions listed above, its President/Executive Director will notify the given institution of the decision by a method requiring a signature, within approximately 14 calendar days of the Commission's decision. Said notification shall contain a succinct statement of the reasons for the Commission's decision.

2. If the institution desires a review of the Commission action, it shall file with the President/Executive Director a request for a review under the policies and procedures of the Commission. This request is to be submitted by the chief executive officer of the institution and co-signed by the chair of the governing board. Requests for review by an institution in a multi-college system shall also be signed by the chief executive officer of the system. The request for review must be received by a method requiring a signature, within 28 calendar days of the date of the mailing of the Commission's notification of its decision to the institution. The fee for the review process shall accompany the request.

3. Within 21 calendar days after the date of its request for review, the institution, through its chief executive officer, must submit a written statement of the specific reasons why, in the institution's opinion, a review of the Commission's decision is warranted. This written statement shall respond only to the Commission's statement of reasons for the Commission's decision and to the evidence that was before the Commission at the time of its decision. In so doing, the institution shall identify the basis for its request for review in one or more of the following areas: (1) there were errors or omissions in carrying out prescribed procedures on the part of the evaluation team and/or the Commission which materially affected the Commission's decision; (2) there was demonstrable bias or prejudice on the part of one or more members of the evaluation team or Commission which materially affected the Commission's decision; (3) the evidence before the Commission prior to and on the date when it made the decision which is being appealed was materially in error; or (4) the decision of the Commission was not supported by substantial evidence.

   The institution may not introduce evidence that was not received by the Commission at the time it made the decision under review.

   It is the responsibility of the institution to identify in the statement of reasons what specific information was not considered, or was improperly considered, by the visiting team or the Commission and to demonstrate that such acts or omissions were a material factor in the negative decision under review.

   The statement of reasons will be reviewed by Commission staff for compliance with this provision. If, in the judgment of Commission staff, the statement of reasons is deficient, it will be forwarded to the Commission chair. Should the Commission chair concur with the judgment of Commission staff, no review committee will be appointed and the statement will be returned to the institution.

   If the statement of reasons is returned, the institution will be provided the opportunity to revise the statement within 21 calendar days from the date the notice of return is sent to the institution. Should the institution resubmit its statement of reasons within the prescribed time period, the revised statement will be reviewed by Commission staff. If the revised statement is still found to be deficient, it will be forwarded to the Commission chair. Should the Commission chair concur that the revised statement is deficient, no review committee will be appointed. This action is final

and is not subject to the WASC appeals process.

4. On acceptance of the institution's written statement referred to in (3) above, a committee of three or more persons will be selected by Commission staff to serve as the review committee. A roster of the review committee will be sent to the institution, normally within 30 calendar days of the date of the Commission's receipt of the institution's written statement. No person who has served as a member of the visiting team whose report is subject to review shall be eligible to serve on the review committee. The institution will be provided opportunity to object for cause to any of the proposed review committee members. After giving the institution this opportunity, Commission staff will finalize the membership of the review committee.

5. Within a reasonable period of time after the review committee has been selected, the President/Executive Director will schedule a meeting of the review committee at a location separate from the institution and Commission offices. No assurance can be made that the review committee process will take place in time for the review to be included on the agenda of the next Commission meeting.

6. Prior to the meeting of the review committee, the committee members will review available information. If additional information is needed, the chair of the review committee may request such information from the chief executive officer of the institution, Commission staff, or the visiting team, before, during, or after the meeting of the review committee.

7. The review will be investigative and designed to determine if any of the grounds for review cited by the institution are valid.

8. Commission staff other than the WASC liaison for the contested Commission action will assist the review committee as needed. The Committee may interview, among others, Commission readers, the chair or members of the previous visiting team, and the Commission staff member who supported the team visit. Outside legal counsel is not permitted to attend or be present in meetings with the review committee without consent of the review committee chair. If allowed to be present, legal counsel will not be allowed to conduct any part of the proceedings but will be permitted to advise institutional representatives as needed. The Commission legal counsel may advise the review committee, but may not attend those portions of the review committee's meetings when it is meeting with institutional representatives, unless legal counsel for the institution is also permitted to be present.

9. The review committee should open and close its meeting with the chief executive officer or other institutional representatives, by attempting to ascertain whether or not the institution has any complaints about any aspect of the review process. All written evidence is to be provided to the review committee together with the institution's request for review. The Commission office shall provide the review committee with documents that were available to the Commission at the time of its action. If additional information is requested from the institution, it is to be provided at least seven business days in advance of the review committee's meeting. The review committee is allowed to consider only evidence that was available to or known by the Commission at the time of its taking action. No new evidence or information relating to actions or events subsequent to the date of the Commission action is to be presented or considered by the review committee.

10. The review committee shall prepare a report that states the reasons for the Commission action, identifies each reason advanced by the institution in its request for review, and, for each reason, evaluates the evidence that the institution has presented in support of its request for review. In addition, the review committee may evaluate additional evidence that, in its opinion, is relevant to its recommendation to the Commission. The report shall state only findings of fact and not consider or cite any evidence relating to facts or events occurring after the date of Commission action.

11. The chair of the review committee will submit a copy of the review committee's report that is referred to in (10) above to the chief executive officer of the institution, the chair of the institution's governing board, and the President/Executive Director of the Commission, normally within 30 calendar days of the end of the review committee's meeting.

12. In a confidential letter to the Commission, the review committee will recommend whether the decision of the Commission that is under review should be affirmed or modified. The recommendation of the review committee to the Commission will not be disclosed to the institution being reviewed. The recommendation is not binding on the Commission.

13. Within 14 calendar days of the institution's receipt of the review committee's report, the chief executive officer will submit a written response to the President/Executive Director of the Commission, with a copy to the Chair of the review committee, for transmittal to the Commission. The review will be placed on the agenda of an upcoming Commission meeting, for consideration by the Commission.

14. Prior to the Commission meeting, a reader meeting will be conducted by conference call or in person where the chief executive officer of the institution and a limited number of institutional representatives will be invited to discuss the review committee report with those Commissioners designated as readers. The chair of the review committee will also be invited to participate in the call. Discussion at this reader meeting will be confined to the report of the review committee referred to in (10) above and to the institution's response to this report.

15. The Commission readers will report the substance of this meeting to the Commission when it meets. Institutional representatives will be invited to appear before the Commission before it takes action.

16. The Commission will reach a final decision to: (1) reaffirm its original decision; (2) modify it; or (3) reverse it. As soon after the meeting as is practicable, the President/Executive Director will notify the chief executive officer of the institution, by a method requiring a signature, of the Commission's decision.

17. When candidacy or accreditation has been denied or withdrawn, the institution may file an appeal with the President of the Western Association of Schools and Colleges, through the President/Executive Director of the Commission, and in accordance with the provisions of Article VI of the Constitution of the Western Association of Schools and Colleges. Copies of the WASC Constitution are available on the Commission website (*www.wascsenior.org*) and from the Commission office. An Appeals Manual is also available from the Commission office. In making its appeal, the institution may only raise grounds and issues in support of those grounds that were raised during the review process.

18. When the Commission action is denial or withdrawal of candidacy or accreditation, the institution retains its prior status until the review process of the Commission is completed. If the institution files a subsequent appeal with the Western Association of Schools and Colleges, its status remains unchanged until that appeal has been heard and decided.

19. Special charges for the review process have been established by the Commission. A list of these charges is available from the Commission office and on the Commission website.

20. The Commission may develop any necessary procedures and instructions to review committees to implement this process. These materials will be available from the Commission office.

Publication of Actions

The Commission makes its actions public through its President/Executive Director, and publishes them on the Commission website. A *Statement of Accreditation Status* for each institution is also available on the Commission website. Warning, Probation, Show Cause and Termination are so noted. If the filing period for review or appeal is still pending, a footnote will be included in the statement to the effect that, "The institution may request a review of this action by (date)." If an institution has requested a review of the sanction action, the footnote will be modified to read "The institution has requested a review of this action."

In all cases of sanction or termination, the Commission gives the institution written reasons for its decision. A public statement about the action is prepared in consultation with the institution. The Commission reserves the right to make the final determination of the nature and content of the public statement. The institution has the right to request that the Commission include on the Commission website a link to institutional comments regarding the sanction.

If an institution so conducts its affairs that they become a matter of public concern, or if it uses a public forum to take issue with a negative action of the Commission related to that institution, the Commission may disseminate, through the President/Executive Director, the action taken and the bases for that action, making public any pertinent information. (See the policy on *Disclosure of Accrediting Documents and Commission Actions* on the Commission website).

Notification of Decisions

Commission Decisions Regarding Accreditation Status

The Commission will provide written notice to the Secretary of the US Department of Education, the appropriate state licensing or authorizing agency, other accrediting agencies, WASC accredited and candidate institutions and the public no later than 30 days after it makes:

- A decision to grant initial accreditation, candidacy, or reaffirmation;
- A final decision to place an institution on Warning, Probation or Show Cause;
- A final decision to deny or terminate candidacy or accreditation;
- Final approval of all substantive and structural changes.

Decisions to place an institution on Warning, Probation or Show Cause, or to deny or terminate accreditation, will be communicated to the public in writing on the Commission website within 24 hours of the Commission's notice to the institution.

No later than 60 days after these decisions, the Commission will make available to the Secretary of the US Department of Education, the appropriate State licensing or authorizing agency, and the public upon request, a brief statement summarizing the reasons for the agency's decision.

Institutional Decisions Regarding Accreditation Status

The Commission will, within 30 days, notify the Secretary of the US Department of Education, the appropriate State licensing or authorizing agency, and upon request, the public, if an institution:

- Voluntarily withdraws from candidacy or accreditation; or
- Allows its candidacy or accreditation to lapse.

Regard for Decisions of Other Agencies

If the Commission is notified by another recognized accrediting agency that an applicant or candidate institution has had a status of recognition with that agency denied, revoked, or terminated, the Commission will take such action into account in its own review if it is determined that the other agency's action resulted from a deficiency that reflects a lack of compliance with the WASC Standards of Accreditation.

If the Commission is notified by another recognized accrediting agency that an accredited institution has had a status of recognition with that agency revoked, suspended, or terminated, or has been placed on a publicly announced probationary status by such an accrediting agency, the Commission will review its own status of recognition of that institution to determine if the other agency's action resulted from a deficiency that reflects a lack of compliance with WASC's Standards of Accreditation. If so, the Commission will determine if the institution's status with the Commission needs to be called into question, or if any follow-up action is needed.

If the Commission is notified by a state agency that an applicant, candidate or accredited institution has been informed of suspension, revocation, or termination of the institution's legal authority to provide postsecondary education, the Commission will review its own status of recognition for that institution to determine compliance with the Standards of Accreditation. If the Commission finds the institution is no longer in compliance with the Standards, the Commission will determine the appropriate action to be taken.

In implementing this policy, the Commission relies on other accrediting bodies and state agencies to inform the Commission of adverse action so that the Commission can undertake the review specified in this policy. Applicants for eligibility with the Commission shall provide information on any actions by a recognized accrediting association within the past five years. In addition, the Commission requires candidate and accredited institutions holding accredited or candidate status from more than one USDE-recognized accrediting body to keep each accrediting body apprised of any change in its status with one or another accrediting body.

V. Appendices

APPENDIX 1

Stipulated Policies

One of the required elements that an institution must include in its Institutional Proposal (see Section III of the *Handbook*) is an Institutional Stipulation Statement signed by the chief executive officer. One of the stipulations is "that the institution has published and publicly available policies in force as identified by the Commission. Such policies will be available for review on request throughout the period of accreditation." In reviewing these stipulations, the institution is expected to note any policies, procedures or publications such as handbooks, that are not in place or are under development, and indicate an anticipated date for completion. In addition, each institution is expected to review the Commission policy on *Compliance Audits* for a more comprehensive list of policies, processes, and structures that institutions are expected to have in place.

Those policies and statements to be stipulated include:

Institutional Integrity

- A widely disseminated, written policy statement of commitment to academic freedom in teaching, learning, research, publication, and oral presentation.
- Due process procedures that demonstrate that faculty and students are protected in their quest for truth.
- Written policies on due process and grievance procedures for faculty, staff and students.
- A clear statement of institutional policies, requirements, and expectations for current and prospective employees.
- Institutionally developed and published non-discrimination, equal opportunity, and affirmative action policies.
- Clearly written policies on conflict of interest for board, administration, faculty, and staff, including appropriate limitations on the relations of business, industry, government, and private donors to research at the institution.
- A clear statement that the institution agrees to abide by the WASC policy on *Substantive Change* and the policy on *Distance and Technology-Mediated Instruction*.

Research

- Policies covering human subjects and animals in research, classified research, patent provisions, cooperative research relations with industry, and other similar issues related to the integrity and independence of the research enterprise.
- Clear policies on how faculty share revenue from patents, licenses, and sales that are generated from applied research for which they are responsible.
- Clear policies that cover the involvement of faculty, the protection of basic research, and the publication of research results in entrepreneurial activity at institutionally-sponsored research parks.

Educational Programs

- Precise, accurate, and current information in printed material regarding a) educational purposes; b) degrees, curricular programs, educational resources, and course offerings; c) student charges and other financial obligations, student financial aid, and fee refund policies; d) requirements for admission and achievement of degrees; and e) the names of the administration, faculty, and governing board.
- Publications that make clear the status (e.g., full-time, part-time, adjunct) of each faculty member.
- Clearly articulated policies for the transfer of credit, which include the criteria for evaluating coursework taken at other institutions and ensure that students who transfer in with general education course credits meet the institution's own standards for the completion of the general education requirement.
- Policies and procedures for the addition of new programs and the elimination of programs, including provision for teach-out of enrolled students.
- Requirements for continuation in, or termination from, academic programs, and a policy for readmission of students who are disqualified for academic reasons.
- Clearly stated graduation requirements that are consistently applied in the degree certification process.

Faculty

- Personnel policies that govern employment of teaching fellows and assistants.
- Policies designed to integrate part-time faculty appropriately into the life of the institution, including orientation and training in assessment of student learning.
- Explicit and equitable faculty personnel policies and procedures.
- Policies on salaries and benefits.
- Policies for faculty and staff regarding privacy and accessibility of information.

Library

- Written library collection development and weeding policies, including the bases for accepting gifts.

Students

- Admission and retention policies and procedures, with particular attention to the application of sound admission and retention policies for athletes, international students, and other cases where unusual pressures may be anticipated.
- Policies on student rights and responsibilities, including the rights of due process and redress of grievances.
- Publications that include policies and rules defining inappropriate student conduct.
- A policy regarding fee refunds that is uniformly administered and consistent with customary standards.

Finances

- Policies, guidelines, and processes for developing budgets.
- Clearly defined and implemented policies with regard to cash management and investments, approved by the governing board.
- Policies and a code of ethics for employees involved in buying, bidding, or providing purchase orders.
- Policies on risk management which address loss by fire, burglary and defalcation; liability of the governing board and administration; and liability for personal injury and property damage.
- Policies on fundraising activities, in compliance with sound ethical accounting and financial principles.

APPENDIX 2

Glossary

Term or Concept	WASC Usage
Academic Calendar	The institution's published scheduling arrangement for classes, i.e., quarter, semester, trimester, summer, intercession, etc.
Academic Freedom	Institutional policies and practices that affirm that those in the academy are free to share their convictions and responsible conclusions with their colleagues and students in their teaching and in their writing. See CFR 1.4.
ACCJC	Accrediting Commission for Community and Junior Colleges of WASC
Accreditation	A voluntary process of approval of an institution or program by an accrediting agency or body. Accreditation signifies that the agency has determined that the institution complies with established standards and policies, offers its students on a satisfactory level the educational opportunities implied in its objectives, and is likely to continue to do so.
Accreditation Liaison Officer	The individual at an institution who is assigned to carry on continuing relations with the accrediting agency and to oversee the various processes associated with the institution's accreditation status. Often referred to as the "ALO." See policy on the Accreditation Liaison Officer on the Commission website.
Accrediting Body or Agency	A voluntary, non-governmental association established to evaluate and approve educational institutions or programs. Some accrediting bodies are recognized by the U.S. Secretary of Education to establish institutional eligibility for certain federal funds such as loans and grants.
ACS	Accrediting Commission for Schools of WASC
ACSCU	Accrediting Commission for Senior Colleges and Universities of WASC
Admission Policy	The rationale, criteria, and processes that determine the applicants who will be admitted to enroll at an institution
ALO	See "Accreditation Liaison Officer"
Appeal of Commission Action	The second and final stage of the Commission's review and appeal process, under which certain Commission decisions may be appealed in accordance with the Constitution of the Western Association of Schools and Colleges. (See also "Review of Commission Actions," below.)
Assessment	The strategies and resulting data by which an institution determines and understands the degree to which students have achieved the intended learning outcomes of a project, course, academic program, or institutional objective. Assessment provides summative evidence of learning and serves to improve learning. See also "Formative Assessment" and "Summative Assessment." The Commission has published a number of documents regarding assessment, which may be found on its website (*www.wascsenior.org*)
Baccalaureate	See "Degrees, B.A. and B.S." below, and also see Standard 2

Term or Concept	WASC Usage
Candidate; Candidate for Accreditation; Candidacy	A status of preliminary affiliation with the Commission, awarded for a maximum of four years, following a specified procedure for institutional review that includes self-study and on-site visitation. Candidacy is not accreditation and does not ensure eventual accreditation. It is an indication that an institution is progressing toward accreditation.
Catalog	An educational institution's official bulletin or publication that states admission and graduation requirements, institutional mission, majors, minors, current course offerings, costs, faculty, and other information necessary for a full and accurate understanding of the institution. A catalog may be available in digital and/or in hard copy and is typically posted on an institution's website.
Central Office	Refers, as appropriate, to the central offices of a university system, such as the University of California, University of Hawaii, and California State University, or the central administration of an independent institution with multiple campuses.
CFR	Criteria for Review. See below.
Co-Curricular Learning	Learning that takes place in activities and programs that are not part of the prescribed sequence of courses in an academic program.
College	Generic term to denote any of the postsecondary educational institutions including universities that are eligible for accreditation or accredited by the Commission. In this Handbook, the term does not refer to a specialized unit of a university campus; it is used as a synonym for "institution."
Commission	Refers to the Accrediting Commission for Senior Colleges and Universities of the Western Association of Schools and Colleges (ACSCU/WASC) and may denote either the entire organization or its decision-making body.
Comparative Data	Data drawn from other sources, from within or more typically, from outside the institution. Comparative data enhance meaning and contextual understanding of the primary data being reviewed and analyzed.
Complaint	A written and signed complaint, based on WASC Standards, that is submitted to the Commission about an institution, or against WASC. See the policy on Complaints and Third Party Comments on the Commission website.
Core Commitments	WASC's Standards and process are founded on two Core Commitments: Institutional Capacity and Educational Effectiveness. Institutions are expected to demonstrate their commitment to these core elements through the review process.
Course	A learning experience of defined scope, duration, and intended learning outcomes as described in a college catalog or bulletin.
CPR	Capacity and Preparatory Review
Credentials	(1) A certificate stating that the student has been graduated from a certain curriculum or has passed certain subjects; (2) a statement signed by a proper authority certifying that a person is authorized to perform certain functions or has been designated as an official representative.

Term or Concept	WASC Usage
Credit, Unit of	A commonly accepted quantification of student academic learning. One semester unit represents the amount of time that a typical student is expected to devote to learning in one week of full-time undergraduate study (typically 40-45 hours including class time and preparation). A full-time undergraduate student normally takes 14 to 16 units per semester; generally no less than 12 units. More time is expected to be devoted to study at the graduate level; typically more than three hours of study for every hour in class. A full-time graduate program is normally nine or fewer units per semester.
Criteria for Review	As used by WASC, Criteria for Review (CFRs) are principles by which institutions are reviewed, which are more specific than the four Standards of Accreditation and are intended to explain and define the four Standards. WASC has established several CFRs for each of the four Standards. Criteria for Review provide guidance to institutions and the basis for Commission decisions about accreditation.
Culture of Evidence	The use of evidence in assessment and decision making, embedded in and characteristic of an institution's actions and practices.
Data Exhibits	See "Exhibits"
Degrees, BA, BS	An undergraduate degree normally representing about four years (typically at least 120 semester or 180 quarter units) of full-time college study or its equivalent in depth and quality of learning experience. The BS usually involves a more applied orientation and the BA a more liberal education orientation, although these distinctions are not always present.
Degrees, MA, MS	A first graduate degree, representing at least one year of post-baccalaureate study (typically at least 30 semester or 45 quarter units) or its equivalent in depth and quality. The distinctions between MA and MS are similar to those between BA and BS. Some MA and MS degrees may be continuations at a higher level of undergraduate work. Others emphasize research that leads to a thesis or project, and prepares the student for doctoral work.
Degrees, MBA, MEd, MPH, etc.	Professional degrees at the master's level requiring up to two years of full-time study.
Degrees, MD, EdD, JD, etc	Degrees with emphasis on professional knowledge and practice. These degrees normally require three or more years of prescribed postgraduate work.
Degrees, PhD	The standard research-oriented degree which indicates that the recipient has done, and is prepared to do, original research in a major discipline. The PhD usually requires three years or more of postgraduate work including an original research dissertation or project.
Diversity	FROM THE WASC STATEMENT ON DIVERSITY: The representation and recognition of people of different backgrounds and points of view in the various constituencies of a college or university (its student body, faculty, staff and governing board).
Educational Effectiveness (EE)	Producing the intended results in an educational endeavor. As used by WASC, EE is one of the two Core Commitments that institutions must meet. It includes clear and appropriate educational objectives and design at the institutional and program level; processes of review, including the collection and use of data, which ensure delivery of programs and learner accomplishments at a level of performance appropriate for the degree or certificate awarded.

Term or Concept	WASC Usage
EER	Educational Effectiveness Review
Exhibits	The required data exhibits for the Proposal, CPR and EER stages of the review.
Experiential Learning	Learning derived from work and other life experiences, for which an institution may award academic credit, following the careful evaluation of such learning under accepted practices and standards. (See WASC policy on *Credit for Prior Experiential Learning* on the Commission website.)
External Evaluator	An external person experienced in the field of specialization, invited to review the structure and content of a program, its relevance to the intended learning outcomes, the standards and appropriateness of student assessments, and also to evaluate the existing learning resources and whether they satisfy program requirements.
Faculty	The instructional faculty of an institution who are responsible for the design, delivery, and assessment of its academic programs. It is up to each institution to determine who holds faculty status. The term "faculty" as used in the Standards and CFRs does not typically include administrators, counselors, or other support staff. Full-time faculty members are those whose primary employment obligation is to teaching and research at the institution. Part-time or adjunct faculty members may have continuing contracts and be involved in program development and review, governance and other matters, or assigned a specified number classes with limited or no other responsibilities to the institution. The institution is responsible for having clear policies on faculty roles and responsibilities.
Fiscal Control; Fiscal Responsibility	Authority for finances and financial management at the institutional level and responsibility for financial transactions including billing, collection of revenues, payment of salaries and other obligations, loans, debt service, bonding, and insurance.
Formative Assessment	Assessment of student learning that is conducted during the course of a student's studies and is used to assess the student's progress in meeting established expectations and to provide feedback to the student for further improvement and development.
Graduate Standing	Advancement from undergraduate to graduate status beyond the baccalaureate degree level. For admission to graduate standing, a baccalaureate degree from an accredited institution is usually the minimum required. Grade point average, qualifying examinations and personal recommendations may also be required. Admission to a graduate program gives the privilege of taking course work; it does not ensure that the student will later be advanced to candidacy for a degree.
Guidelines	As used by WASC, Guidelines set forth expected forms or methods for demonstrating performance under a Criterion for Review. They indicate normative ways that institutions address the Criterion for Review referenced by the Guideline. They are interpretations and are not intended to be prescriptive. Institutions may demonstrate other ways of meeting the basic principles set forth in the relevant CFR.
Higher Education	Postsecondary education with the goal of earning academic degrees or credentials.
Independent College	College or university that is not directly supported by allocations from a state government.
Institutional Autonomy	As used in CFR 1.6, this principle refers to the ability of the academic institution to operate independently of another entity with which it is affiliated or related.

Term or Concept	WASC Usage
Institutional Presentation	Materials prepared for each stage of the Institutional Review Process, including the Institutional Proposal, the Capacity and Preparatory Review report, and the Educational Effectiveness Review report.
Institutional Research	Collection of institutional data useful for analysis and planning.
Mission (Institutional)	An institution's formally adopted statement of its fundamental reasons for existence, expressive of its shared purposes and values, and central to its decisions about priorities and strategic objectives.
Outcomes	The intended results for any unit or department of a college or university. In the context of WASC Standards, primary emphasis is placed on student learning outcomes, which set forth the anticipated or achieved results of courses or programs or the accomplishment of institutional objectives, as demonstrated by such indicators as student attitudes, knowledge, skills and performance. Outcome measures may also address student access, success and other indicators aligned with institutional mission and goals.
Peer Reviewer	A person who is professionally qualified in subject specialization and experience for the review of an educational or other program either for internal quality assurance and improvement or for accreditation purposes.
Planning	The development of a design by which an institution sets goals and objectives and establishes the means by which the accomplishment of the goals and objectives are measured. Institutional planning may address educational programs, support services, physical plant, budgets and finances, and other aspects of institutional function and operation.
Portfolio-Based Credit	A compilation, analysis and reflection on learning from non-classroom experiences, which is prepared by a student using specified criteria, and which is evaluated to determine whether credit may be awarded for experiential learning.
President	A term commonly used to signify the chief executive officer of an institution. In some systems, referred to as a Chancellor.
Private College	See "Independent College"
Professional Program	An educational program designed to prepare persons for a specific profession. It may apply to undergraduate programs that prepare students for direct entry into employment (e.g., nursing, accounting). Some professional programs are offered at both undergraduate and graduate levels (e.g., engineering, business management). Others are primarily or solely graduate in nature (e.g., medicine, law, dentistry). Graduate-level professional programs typically presuppose an undergraduate degree.
Program	A systematic, usually sequential, grouping of courses that forms a considerable part, or all, of the requirements for a degree or credential. The term may refer to the total educational offering of an institution.
Public College or University	A college or university created by the State or a State entity that receives direct state appropriations for its operations and is governed by a board that is elected or appointed by public officials.

Term or Concept	WASC Usage
Public Service	Service provided by most institutions of higher learning to their external (non-academic) communities—local, regional, national, international, or within a specific profession. Public service includes public lectures and performances, various forms of applied research, non-credit courses, and extension programs. Public service may also include making the physical plant available to the outside community. Public service activities should not include those unrelated to, or in conflict with, the institution's purposes and capabilities.
Quarter	An academic calendar of approximately 11 weeks, with ten full weeks of academic class work or its equivalent in effort.
Research	Collection and analysis of data carried on by teacher-scholars in order to remain current in their fields or areas of expertise and/or to expand a field of knowledge or its application ("pure" or "applied" research).
Review of Commission Actions	Upon request of an institution, the reexamination of the Commission's action to impose a sanction. (See "Commission Review Process," Handbook Section IV.)
Rubric	An assessment tool used to measure the effectiveness of a process, work product, or student work. It is a scoring guide that seeks to evaluate performance based on a full range of criteria rather than a single numerical score and which sets forth the criteria on which work will be judged. WASC has developed a number of rubrics to assist institutions and teams in evaluating various aspects of their student learning assessment processes. See the Commission website.
Semester	An academic calendar of about 17 weeks with at least 15 full weeks of academic class work or its equivalent in effort.
Standards	Applied to institutions, standards refer to the level of performance used to determine student achievement at the course and program levels. See, for example, CFR 2.4.
Standards of Accreditation	The Standards of Accreditation are the rules or principles used as a basis for judgment in accreditation reviews. WASC has four standards that flow from the two Core Commitments. They are used to guide institutions in assessing institutional performance, to identify areas needing improvement, to provide a framework for institutional presentations to the Commission and review teams, and to serve as the basis for judgment by evaluation teams and the Commission. The WASC Standards are meant to define institutional quality and educational effectiveness and lead to improvement of quality.
Statement of Accreditation Status	A statement commonly used by regional accrediting commissions to provide public information about accredited and candidate institutions and their accreditation status.
Summative Assessment	Assessment of student learning that is conducted at the culmination of the student's studies and provides evidence of the student's learning for an entire course of study. Applied organizationally, it refers to methods used to evaluate the overall effectiveness of a program, an institution, or some element of the course of study.
Team (Accreditation, Evaluation, Visiting)	A team of peers from the higher education community that is selected and trained to review an institution's presentation and other documents and conduct an on-site evaluation visit to the institution.

Term or Concept	WASC Usage
University	An institution with numerous graduate-level degree programs and adequate resources to support them, as defined by the Standards.
WASC	Western Association of Schools and Colleges; in the context of this Handbook, primarily the Accrediting Commission for Senior Colleges and Universities (ACSCU/WASC)

INDEX

A

Academic freedom 12, 51, 54
Accreditation Liaison Officer (ALO) 4, 54
Accrediting agencies 5, 48
Accrediting Commission for Community and Junior Colleges (ACCJC) i, 54
Accrediting Commission for Schools (ACS) i
Accrediting Commission for Senior Colleges & Universities (ACSCU) 38, 54
Action letter 3, 27, 31, 37
Admissions processes 15, 16, 52, 54, 55, 57
American Association of University Professors 5
Annual Report 5

B

Baccalaureate degrees 14, 15, 54, 57
Board of Trustees, see "Governing Boards"

C

Candidacy, Candidate for initial accreditation 4, 5, 24, 30, 34, 38, 40, 41, 44, 45, 47, 48, 49, 55
Capacity and Preparatory report 31-33
Capacity and Preparatory Review 8, 24, 26, 28, 30-34, 36, 37, 40, 41, 55, 58
Chancellor, see "Chief Executive Officer"
Chief Executive Officer (CEO) 19, 27, 29, 42, 44, 45, 46, 47, 51, 58
Code of Good Practice and Ethical Conduct 3-4
Collective bargaining 5, 20
Collegiate athletics 17
Commission action 3, 5, 9, 34, 37, 40-48
Commission decisions i, 3, 34, 37, 40-48
  notification of 48
  on institutions 40-44
Commission meeting 3, 40, 46, 47
Commission policies 9-10, 13, 17, 20
Commission review process 45-47
Commission sanctions 42-44
Commission staff 3, 4, 27, 30, 45, 46
Commissioners 47
Complaints 12, 13, 55
Completion rates 11, 15
Confidentiality 3
Conflict of interest 3, 4, 51
Core Commitments 2, 5, 8, 24, 25, 27, 28, 30, 37, 42, 55, 57, 59
  to Educational Effectiveness 8
  to Institutional Capacity 8
Credit for prior experiential learning 57
Criteria for Review 9, 11-22, 28, 32, 33, 55, 56
Culture of Evidence 2, 22, 29, 56

D

Data, collection of 21, 22, 25
Data portfolio 30, 31-32, 33, 36, 37
Decisions, notification of 48
Decisions of other agencies 49
Default rate 32
Department of Education 30, 42, 48
Disclosure of accrediting documents & commission actions 13, 48
Distance education & technology-mediated instruction 17, 29, 30, 32
Diversity, Statement on 12, 13, 56
Due process 3, 12, 51, 52

E

Educational effectiveness 2, 3, 5, 8, 14, 21
Educational Effectiveness report 35-37
Educational Effectiveness Review 24, 26, 28, 29, 34-38
Eligibility applications 38, 49
Exhibits 24, 29, 30, 31, 32, 33, 36, 56, 57

F

Faculty 3, 8, 9, 12, 14, 15, 18, 20, 21, 22, 25, 28, 31, 32, 33, 35, 36, 37, 42, 51, 52, 55, 57
  Development 8, 18, 25
  Evaluation 16, 18
  Policies 12, 16, 51, 52
  Promotion 16
  Research 12, 51
  Scholarship 12, 51
  Tenure 16, 18
Federal government 5
Federal policy 4, 30
Federal regulation i, 42-43, 44
Fees and charges 38
Financial aid 16, 52, 54
Financial audits 19
Format of the Standards 9-10
Fundraising 53

G

General education 14, 52
Governing boards 3, 19, 42, 44, 45, 47, 52, 53, 56
Grading 12, 22
Graduate degree programs 15, 56
Graduation rates 27, 28, 29, 32, 33, 36
Grievance policies and procedures 12, 51, 52
Guidelines 9-10

H

Honorary degrees 13
"How to Become Accredited" 5, 38
Human subjects in research 12, 51

I

Information literacy 14
Information technology 19
Initial accreditation 4, 5, 24, 38, 40, 41, 48
Institutional capacity 2, 5, 8, 9, 24, 25, 26, 27, 30, 31, 33, 34, 42, 43, 55
Institutional presentation 9, 29, 30, 58, 59
Institutional Proposal 5, 24, 26-30, 51, 58
Institutional research 22, 33, 58
Institutional review process ii, 4, 9, 23-38, 58
Institutional stipulation statement 29, 51
Institutional units in a system 20
Interim reports 27, 34, 37, 41, 42

International students 17, 52

L

Law schools in California 17
Learning outcomes, see "Student learning outcomes"
Legal fees 38
Library 15, 16, 52
  Information services 16
Litigation 38

M

Maintenance of accreditation records 13
Mission statements 11

N

Notification of decisions 48

O

Off-campus programs 29, 30
Order to Show Cause 40, 43-44
Organization chart 19
Other agencies, decisions of 49
Outcomes of the accreditation review process 25

P

Planning 2, 19, 21-22, 25, 33, 36, 58
Policies, see "Commission policies"
President, see "Chief Executive Officer"
Probation 40, 41, 42, 43, 45, 48, 49
Program review 8, 15, 18, 22, 28, 30, 32, 33, 34, 36
Proposal, see "Institutional Proposal"
Proposal review process 30, 34
Public access to the Commission 3
Publication of actions 48

Q

Quality assurance 22, 25, 27, 28, 35, 36, 37, 58

R

Reaccreditation, see "Reaffirmation of accreditation"
Reaffirmation of accreditation 5, 42
Reflective essays 31, 32, 33
Refunds 12, 53
Religious affiliation 12
Research 2, 12, 15, 21, 22, 28, 33, 35, 51, 56, 57, 58, 59
  Faculty, see "Faculty, Research"
  Institutional, see "Institutional research"
  Policies 51
Retention 11, 15, 27, 28, 29, 30, 32, 33, 36, 52

S

Sanctions, see "Commission sanctions"
Scholarship, see "Faculty, Scholarship"
Special Visit 34, 37, 41, 42, 43, 44
Staffing 18
Stakeholder involvement 15, 22
Standards of Accreditation ii, 2, 5, 8-22, 24, 26, 27, 33, 41, 42, 43, 49, 56, 59
  Criteria for Review 9, 11-22, 28, 32, 33, 55, 56
  Format 9-10
  Guidelines 9-10
  Standard 1 11-13, 42
  Institutional Purposes 11
    Integrity 12-13
    Related Policies 13
  Standard 2 14-17, 28, 30, 54
    Related Policies 17
    Scholarship & Creative Activity 16
    Support for Student Learning 16
    Teaching & Learning 14-15
  Standard 3 18-20
    Faculty & Staff 18
    Fiscal, Physical, & Information Resources 19
    Organizational Structures & Decision-Making Processes 19-20
    Related Policies 20
  Standard 4 21-22, 28, 30
    Commitment to Learning & Improvement 22
    Strategic Thinking & Planning 21
Statement on Diversity 12, 13, 17, 20, 56
Status of accreditation 5
Stipulated policies 51-53
Student conduct 12, 52
Student learning outcomes 15, 19, 25, 27, 28, 32, 33, 36, 55, 57, 58
Student satisfaction 16
Student support 16
Study abroad 17
Substantive Change 13, 16, 27, 30, 38, 43, 44, 51
  Policy on 51
  Substantive Change Manual 43, 44
Summary sanctions for unethical institutional behavior 44

T

Team reports 3, 31, 34, 35, 36, 37, 40
Tenure, faculty 16, 18
Term of accreditation 33, 42
Termination of accreditation 42, 44, 48, 49, 52
Third party comment 13, 55
Title IV 32
Transfer and award of academic credit 17
Transfer students, process 16

V

Visits 3, 4, 27, 37, 38, 42, 43, 44

W

Warning 40, 41, 42, 43, 45, 48
WASC Constitution 47